



Souvenir

**55th Annual Conference of
Ophthalmological Society of Assam
Guwahati, Assam**

12th-13th November, 2022

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SOUVENIR

55th Annual Conference Ophthalmological Society of Assam (OSACON 2022)



Under Aegis of
Guwahati Academy of Ophthalmology

Venue

Radisson Blu Hotel
Guwahati-33, Assam

12-13 November 2022

Editor

Dr. Madhurjya Gogoi

Ophthalmological Society of Assam

Regd No: KAM(M)/240/A 23/273 of 2010-2011

Registration of Societies Act XXI of 1860, Validity extended upto 02.04.2022

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Gauhati Academy of Ophthalmology

Regd No KAM(M)240/A-21/62



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Bhattacharjee, Subhra Kinkor
Goswami, Arundhati Borthakur

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**All India
Ophthalmological Society**

Dr. Lalit Verma

President

All India Ophthalmological Society
Director

Vitreo-Retina & Lasers,
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Message

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Imm. Past President

Dr. Barun Kumar Nayak

I am very happy to know that 55th Annual Conference of Ophthalmological Society of Assam is being organized at Guwahati, Assam on 12-13 November 2022.

Today Google has made the World flat & lot of our patients carry a pamphlet of available treatment options & diagnostic procedures about their disease. Hence 'Knowledge of 'Latest Techniques & Technology in Ophthalmology' is essential for progress & person who knows / is aware of the latest always has an edge.

Today, All of us are so much dependent on Technology, that without knowledge of latest techniques / procedures, we feel handicapped & the entire management of Patients today depends on 'How much the treating doctor' is versed with the Latest.

I am very optimistic that all the attending delegates will derive lot of benefit from the proceedings of 55th Annual Conference of OSA and the knowledge gained thereof will ultimately help in Better Patient Care.

My best wishes to the entire organizing team.



LALIT VERMA
President, AIOS

Correspondence Address

AIOS Headquarter : All India Ophthalmological Society, 8A, Karkardooma Institutional Area, Near DSSSB Building Manglam Road, Karkardooma, Delhi - 110092 (India) ☎ 011 - 22373701- 05 ✉ aiosoffice@aios.org 🌐 www.aios.org

Message

Chief Guest

Dr. Narendra Nath Dutta



It gives me immense pleasure to learn that the Ophthalmological Society of Assam (OSA) is organising the 55th Annual Conference of OSA (OSACON 2022) on 12th and 13th of November 2022 at Radisson Blu, Guwahati, Assam.

I would like to extend my heartfelt thank you to OSA for inviting me as the Chief Guest.

Being an ENT Specialist I have been associated with OSA for years now. As we all know Otolaryngology and ophthalmology have a long and congenial professional relationship in the development of their mutual specialties over many years.

Hope the Conference will be a great success and will be helpful for the development of the speciality in our region.

We look forward at the successful journey of the event.

Thank You.

Dr. N. N. Dutta

Chairman & Managing Director-down town hospital

Founder Chancellor- Assam down town University

Our Chief Guest- a brief introduction

Name : Dr. Narendra Nath Dutta

E-Mail : drnndutta@gmail.com

Dr. Narendra Nath Dutta was born in a village called Khetrapara near Tihu. He was a brilliant student and completed his schooling from Tihu High School and completed his higher education from Cotton College, Guwahati. Dr Dutta completed his MBBS from Gauhati Medical College, and obtained his Master Degree in ENT from All India Institute of Medical Sciences, New Delhi.

He was awarded the British Commonwealth Fellowship while he was working in Medical College and went for higher training in Micro Surgery of ear in UK and France in 1980-1981.

He attended 2 Microsurgery workshops under Prof. Michael Portman in Bordeaux, France.

He has also visited Kenya as a volunteer Microsurgeon and offered services for one month for poor patients in remote areas under Rotary International Program.

Professional Summary

- After his post Graduation in AIIMS, he joined Gauhati Medical College as a teacher. Later, he took voluntary retirement from the post of Assistant Professor of ENT from GMCH.
- Thereafter, he started the first corporate hospital of the North East India named as down town hospital in the year 1989.
- The hospital is privileged to offer post graduate course under Diplomate of National Board in 5 disciplines viz., General Medicine, General Surgery, Family Medicine, ENT & Othopaedic Surgery, providing a platform for the PG aspirants from different parts of the country. Dr. N N Dutta was a DNB Examiner for ENT Department. The hospital is also running a Certificate course in Diabetology (RSSDI Approved), Accredited by Jaipur National University.
- The University currently offers more than 64 courses and has more than 8,000 students. The University today is ranked among the top 10 best Private Universities established after 2000 in India by the India Today.
- Dr. Dutta has been actively associated with many social organizations and was the district Governor of Rotary International (1995-1996) District 3240. He was Rotary volunteer to Kenya.
- He invited Dr. Eckard Muller from South Africa in the year 1996 to study the erosion problem of Majuli for save Majuli Project under Rotary Volunteer Scheme.
- Under his able leadership, direct employment has been generated to more than 6 thousand men and women. Also more than 3 Lakh individuals have been indirectly employed by Assam down town University and down town hospital.
- Dr. Dutta has been applauded for initiating and successfully running an eco-tourism project in Samaguri, Assam in association with the Assam Tourism Development Corporation Ltd.

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- The hospital runs an organic farm house in Sonapur, Assam where cows, goats ducks, hens are raised and also vegetable and fishery harvesting is done. Milk, vegetables and other products are used for the benefit of the patients admitted in the hospital. Similarly in University cows, ducks, goats are raised and also vegetable and fishery harvesting is done and the products are used for the benefit of the University.
- With the vision of imparting quality primary education for the forthcoming generations, a chain of schools has been established in different parts of Assam. Since 2019, down town Gurukul has been operating in Moranhat in Upper Assam, in Charaideo district of Assam, under the auspices of the down town Charity Trust. Another premium day boarding school located at the picturesque location of Hathisila, Panikhaiti, Guwahati named the down town School, Guwahati has been set up with the primary intention of providing a comprehensive, holistic education to the future change-makers of the society. The peaceful location, with green hills as the background offers the students a varied opportunity to be involved in healthy, safe and nurturing outdoor play and academic activities.

Present Post

At present, Dr. Dutta holds the position of the **Chairman and Managing Director, down town hospital Ltd, Chairman of down town Charity Trust and Founder Chancellor of Assam down town University.**

Achievements

- Awarded the Fellowship of International College of Surgeons in 1982.
- Organized several workshops in down town hospital and various National and International Conferences in Guwahati as the organizing Secretary and Organizing Chairman.

Awards and Recognitions

- During his tenure as the district Governor of Rotary International (1995-96), Dr Dutta received several awards in Rotary International for District 3240.
- Got the citation for Meritorious Service from Rotary Foundation 2002
- Awarded All India Achievers Citation in 1999.
- Received the Distinguished Service Award 2014 from Rotary International.
- He was awarded with the Prof. Dukhan Ram award in XXIV Bihar State Conference of the Association of Otolaryngologists of India in the year 2000.
- He was felicitated on the Annual General Meeting of North East Chamber of Commerce and Industry (NECCI) on 30th Oct 2002 for his outstanding performance and exemplary service to the society.
- Felicitated by National Assembly on Pediatric Emergency Medicine (NAPEM) for his exemplary work in the year, 2012.
- Was awarded with the Siksha Vibhushan, 2015 by the Brahma Kumaris Education Wing of Raj yoga and Education of Research Foundation.
- He was felicitated by ICS-ISCON in the year 2015, for his Valuable Contribution.

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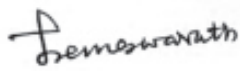
- He was felicitated by the Assam Police on the Assam Police Day in the year 2015.
- He was invited as the Chief Guest in Guwahati University Youth Festival, 2015.
- He was conferred with a token of appreciation by Johnson & Johnson for pioneering the use of Harmonic Scalpel at down town hospital as a first surgeon in India.
- Dr. Dutta has published scientific papers at national and international forums.
- He has published various articles in Assamese and English in local newspapers and magazines and also 2 book titled “Xoru Xoru Kothar Xophura - 1” and “Xoru Xoru Kothar Xophura – 2”.
- A special book has been published for children – “Emails from my Grandpa” by Saanvi Dutta Das, wherein readers can find beautiful and thought provoking email conversation between Dr. Dutta (Grandpa) and his 10 years old Granddaughter (Saanvi).
- He was speaker in the 3rd Annual Northeast Healthcare Summit, 2016.
- On 2nd June 2018, Dr. Dutta received the Son of the Soil Award from the then Chief Minister of Assam Shri Sarbananda Sonowal for his exemplary services in the field of Private Sector Development.
- He was awarded with the Lifetime Achievement Award, 2020 by Srimanta Sankaradeva University of Health Sciences, Assam and Lifetime Achievement Award, 2021 by Dr. B Borooah Cancer Institute for his outstanding contribution in the Healthcare Sector.
- He was awarded with the Lifetime Achievement Award, 2020 by Srimanta Sankaradeva University of Health Sciences, Assam and Lifetime Achievement Award, 2021 by Dr. B Borooah Cancer Institute for his outstanding contribution in the Healthcare Sector.
- The Indian Medical Association conferred Dr. N N Dutta with “Academic Entrepreneurship Excellence Award” 2021, for his contribution towards the wellness and growth of academic atmosphere in the country.
- NEBAOICON 2020 conferred him with Life time Achievement Award for his outstanding contribution in the Healthcare Sector.
- Honorary Degree of Doctor of Science- Honoris Causa (Hon. D.Sc) was bestowed upon him by University of Science & Technology(Meghalaya) in recognition of his pioneering efforts in transforming higher education in the North East and outstanding contribution in the field of Healthcare & Research Sector and Academic Administration.

Message
President
Ophthalmological Society of Assam



The 55th Annual Conference of the Ophthalmological Society of Assam (OSA) is going to be held at Guwahati on the 12th and 13th of November 2022. The conference will offer a platform for professional contact among the delegates and participants. The Local Organising Committee (LOC) has been working hard to make the conference a success in every sense of the word. I am sure, the Chairperson Scientific Committee, will endeavour to make the scientific sessions fruitful, and enlightening for the participating delegates. I hope each of our esteemed delegates will benefit significantly from the scientific feast, and lamp of knowledge will shine brightly. I offer my sincere thanks and deep gratitude to all members of the LOC, the faculties, the speakers and the delegates.

I wish OSACON 2022 a grand success.

A handwritten signature in black ink, reading "Premeswar Nath".

(Dr. Premeswar Nath)

Message
General Secretary
Ophthalmological Society of Assam



Respected OSA members,

It is my privilege to welcome you to take part in the 55th annual conference of OSA, OSACON 22, which will be scheduled to go ahead as a full face to face conference on the 12th & 13th November 2022, at Hotel Radisson Blu, Guwahati, the city, the gateway of North East India. Our team LOC is leaving no stones unturned to make the event more memorable, after the Covid 19 outbreaks of the last two years.

Please take a break from your busy schedule to enjoy the opportunity to sharpen your knowledge, meet your friends and explore your commercial aspects. I am sure you will enjoy the meet, not be disappointed and it will be an academically & socially stimulating conference, during the festive session of our state.

I anticipate a large gathering across Assam and entire North Eastern states, as well as a galaxy of eminent speakers across the country.

The scientific and other programs of the OSACON 22, have been already finalized. The Team LOC, under the leadership of Guwahati Academy of Ophthalmology is working hard to organize the meet for Academic as well as face to face get together among us. They will be in touch with further updates in time to time.

Your active participation can only make it a fruitful one. I would also like to request all the members of OSA to bring ideas for making this grand event more remarkable by your valuable inputs and participation.

Long live OSA.

With warm regards

Dr Jayanta Kumar Das

Message
President
Local Organising Committee



Dear friends,

“Whatever happened was good, what’s happening is going well, whatever will happen, will also be good. You need not have any regards from the past. Donot worry for the future live in the present.” Bhagawad Gita)

Due to the COVID 19 epidemic after a long hiatus, the 55th Annual Conference of Ophthalmological Society of Assam is going to be held in Guwahati. Guwahati is the capital city of Assam and gateway to the North-Eastern states of India. Also the Land of Maa Kamakhya, Hajo Powa Mecca and many other ancient and modern attractions.

The show must go on ! While the COVID-19 epidemic spread worldwide, significant progress have been made by international researcher in the treatment (Geographic atrophy), diagnosis(AI assisted) and management of other previously untreatable eye diseases.

We will have several presentations discussing interesting concepts of various ophthalmic diseases. Focus will be on current practices in cataract management, myopia treatment, glaucoma, advances in the management of vitreo-retinal diseases, ocular oncology and many more. Eminent speakers and guests from all over the country will share and exchange their knowledge and vast experience.

The Organizing Committee have put all their efforts to-gather to make this Annual Ophthalmic extravaganza a truly memorable one. I express my gratitude towards you all.

I am pleased to be able to welcome everyone to this much awaited on siteconference.

Long Live Ophthalmological Society of Assam.

Best wishes.

Nilutpal Borah

President – Organizing Committee

Guwahati Academy of Ophthalmology

Message
Chairperson
Local Organising Committee



Greetings dear friends,

On behalf of the organising committee of the 55th annual conference of OSA, I do hereby extend invitation to Guwahati for the aforesaid conference to be held at Radisson Blu on the 12th and 13th November.

It will be really heartening to meet all our friends after the confused period of two unforgettable years.

Our members are on their toes to give the best .

Dr. Nabajyoti Dutta

Message

Organising Secretary



Dear member,

At the outset, I offer my sincere respect and regards to all my teachers and seniors.

It is an opportunity of great honour, and also much responsibility to be the Organising Secretary of the first full-fledged annual conference of our society since the pandemic.

While scientific interactions have continued on the virtual platform, nothing truly can substitute the charm of a conference as we have known it forever.

I, along with the rest of the Organising Committee, eagerly looking forward to your active participation and support. Despite our best efforts, I understand that there will be shortcomings; I apologise for the same.

Looking forward to welcoming you in Guwahati.

Long Live OSA!!!

Sincere Regards,

Dr Abhijit Bhuyan
Organising Secretary
Local Organising Committee
OSACON 2022

Message

Chairperson Scientific Committee



Dr. Arundhati Borthakur

Greetings from Ophthalmological Society of Assam!

It gives me great pleasure to invite everyone to the 55th Annual Conference of the Ophthalmological Society of Assam (OSA) to the beautiful city of Guwahati.

This meeting is **Special** because it is the first Physical Meeting after the Covid -19 Pandemic and also the last one of my tenure as Chairperson Scientific Committee (CSC). The local Organizing Committee & Members of OSA has worked hard to make all possible arrangements to have a Great Scientific Feast where in the students & Members can learn through interaction with various National & Local Faculty and update themselves with the latest in the field of Ophthalmology.

I would also like to take this opportunity to thank all my Teachers, Seniors, Friends, especially the members of my Scientific Committee for all their support during my tenure. In the last seven years we tried our level best to uplift the academics of OSA through various well designed Scientific Programmes both in the physical and virtual mode, involving various eminent National & International luminaries of our fraternity. The report of the last six years is published in the Journal of OSA (JOSA) Vol. 6 issue 1.

Looking forward to meeting you all and wishing a great Academic Extravaganza with Entertainment and Fellowship.

PRANAM ! DEAR DELEGATES

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From the Editor's desk,

07 November 2022
Guwahati, Assam



A warm welcome to all delegates and participants from Ophthalmological Society of Assam !

The 55th Annual Conference of OSA is a much awaited on-site meeting after a fair hiatus, and the LOC has ensured that participants chance to re-kindle that unique bond that only face to face interaction can provide.

Over the years, members have whole heartedly contributed their work for publication. To accommodate the maximum possible, OSA now offers one of two publication platforms. Our core contributions, namely scientific, are peer reviewed and are considered for the journal of OSA (*JOSA*), now in its 6th year. Other submissions go into the *Souvenir*. The souvenir is the legacy annual publication, and it aptly complements the journal in capturing what has come to be known as 'Life beyond Ophthalmology', as it were.

The current issue of the souvenir includes traditional writeups, poems, current issues of compliances, setting up a private clinic, finances, achievements, and so forte. A new section comprise brief summaries of OSA proceedings from the 'Beyond Ophthalmology' section. It is hoped that readers find the compendium refreshing

A point is worth mentioning. Estwhile All Assam Ophthalmological Society (AAOS) has an Annual Membership scheme. This was replaced by 'life membership' only when the change to OSA was effected sometime around 2010. The informed reader's attention is drawn to the obituary section; some records have proved simply too elusive to trace.

Our gratefully acknowledgement goes to all contributors who have worked tirelessly in various capacities in the visual sciences for the good of society at large. Any error is inadvertent, and the editor seeks your indulgence for the same.

With best wishes for the success of the conference,

Dr Madhurjya Gogoi, MD

Editor, Souvenir, OSACON 2022

Connect with us at:

website: www.osa.ind.in; Email: ophsocassam1967@gmail.com

Facebook group 'Ophthalmological Society of Assam'

A new feature *Sign In/Sign Up / Login* was introduced in the OSA website (www.osa.ind.in) in August 2020.

Members may update their own profile details.

Corrigendum

In Souvenir OSACON 2021, page 27,
last para. A.M.C. may be read as Tezpur.
The error is regretted. —Ed.

১৭/৭/২১ তারিখে OSA ৰ GLS. ডাঃ কুমাৰ ভয়স্ক কুমাৰ বাসুদেবে অহি মোক A.M.C ৰ Eye OPD তে লগ
কৰি মোৰ লগতে আনিমপন চৌধুৰীৰ বাবেও দুখন অফিচিয়েল প্ৰমাণ পত্ৰ আৰু দুটা স্মাৰকো আমাৰ হাতত তুলি দি
আমাক প্ৰকৃততে অভিভূত আৰু বাকবন্দ কৰি তুলিগৈহি। Long Live O.S.A.!

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Obituary



12.12.1946– 29.05. 2022

Dr Rajendra Prasad Sarma

OSA registration number LM-05.

DOB 12th December, 1946; expired on 29th May, 2022.

He joined in the post of medical officer ONGC, Sibsagar and retired from the same organization as DGM, from Ankeneswar of Gujarat.

He was a popular ophthalmologist from Guwahati.

Acknowledgements :

Dr. Premeswar Nath
Dr. Chiranjib Kumar Barua
Dr. Gautam Saikia
Dr. Dipul Choudhury
Dr. Nareswar Dutta

Obituary



27/8/1946- 05/03/22

Debeswar Chakraborty

OSA LM No not available

S/o Late Dr. Gopeswar Chakraborty, Late Mrs. Kamaleswari Devi

Birth: Pajipar, Barbari, Nalbari, 27/8/1946

School: Pajipar LP school,

Matric: Cotton Collegiate High school, 1962

PU: Arya Vidyapith

MBBS: AMC, 1970

MS Ophtha :AMC, 1975

Assam State Health Services service from 1975 at Goalpara, Dergaon,
Golaghat, Sivasagar.

Retired as SDMO of Bihaguri PHC, Sonitpur in 2006.

Died on 05/03/22 at the age of 78 yrs at his birth place.

Acknowledgements :

Dr. Premeswar Nath
Dr. Chiranjib Kumar Barua
Dr. Gautam Saikia
Dr. Dipul Choudhury
Dr. Nareswar Dutta

Obituary



02/03/1955 - 27/06/2022

Vijay Kumar Jain, OSA-LM-028

Dr. Vijay Kumar Jain was born on 02/03/1955 in Doondoma Assam. He completed his pre university from Cotton College Guwahati and M.B.B.S. and P.G. Medical from Assam Medical College Dibrugarh in the year 1982. He got married in the year 1978 with Mrs. Shobha Jain of Guwahati. He started his Ophthalmology practicing in 1983 and was the to bring Refractometer individually and he also brought Lasik Laser jointly with other fellow doctors first time in North East. He build his own private Eye Hospital in 1994 at Guwahati named as VISION HOSPITAL.

He took his contact lens training from SHAH & SHAH Kolkata in the year 1989. He also got the training for SICS in the year 1993 and Phaco Emulsification in the year 2003 from Arvind Eye Hospital Madurai and L.V.Prasad Eye Hospital Hyderabad respectively. He was one of the Senior and respected Ophthalmologist of N.E.region.

He had two sons namely Late Rahul Jain who died in 2003 after completing M.B.B.S. from Dr. B.R. Ambedkar College Bangalore, and Rohit Jain who is currently running a Pharma Company in the name of RARA PHARMA and also managing his father's hospital (VISION HOSPITAL).

He was very soft kind hearted and down to the earth personality. He used to run free Eye OPD on every Wednesday and also used to operate free Ctract Surgery for the power and needy people. He was working and attending his hospital till 25/06/2022. Unfortunately he expired on 27/06/2022 due to cardiac arrest. He left behind his wife and son.

He was also active life member of following organization:

1. Ophthalmological Society of Assam
2. All India Ophthalmological Society
3. All India Jain Doctors Federation

Acknowledgement : Rohit Jain

OSA Theme Song



গীতিকার : ডাঃ সৌৰভ কুমাৰ ভূঞা
সুৰকাৰ : অলিম্পন চৌধুৰী

অসতো মা সৎ গময়
তমসো মা জ্যোতিৰ্গময়
মৃত্যোৰ্মা অমৃতং গময়
তমসা নাশি পোহৰ বিচাৰি
তোমাৰ বাবে তেওঁৰ বাবে
দেশৰ বাবে দহৰ বাবে
পোহৰ সেনানী যাওঁ আগুৱাই

সাতষষ্ঠিতেই সজালো মঞ্চ
এন্ধাৰ পোহৰৰ বহিলো অংক
জনগনকে দিলো সপোনৰ আশা
বুজো আমি মাথো জ্যোতিৰে ভাষা

সীমনা ভেদি আগবাঢ়িছো আমি
দেশে বিদেশে আমি বিলামে জ্যোতি
সাতোভনী আমি যাওঁ আগুৱাই
পোহৰৰে ফুল যাওঁ যে বিলাই
তমসা নাশি পোহৰ বিচাৰি...
... পোহৰ সেনানী যাওঁ আগুৱাই



Long Live O.S.A.
Long Live O.S.A.
Long Live O.S.A.

Know your incoming President



Dr Subhra Kinkor Goswami is presently Vice President of Ophthalmological Society of Assam (OSA), and was formerly General Secretary of All Assam Ophthalmological Society.¹

He is a leading Cataract surgeon of this region, presently MD of Nalbari Eye Hospital. He graduated from Gauhati Medical College and completed his Post Graduation from Aligarh Muslim University. Dr Goswami has illustrious long and short time residency experiences from different premier institutes of India. Few of them are CMC Hospital, Vellore, Venu Eye Institute New Delhi and Eye Institute Rajkot. He has attended numerous National conferences and presented Scientific papers. He had organized SAARC ophthalmologist summit at Nalbari Eye Hospital in 2015 commemorating Silver Jubilee Celebration of Nalbari eye Hospital. He had also organized hundreds of free Eye Camp in inaccessible areas of Baksha, Nalbari, Barpeta, Darrang and Chirang Districts of Assam and done thousands of free Cataract Surgeries from those areas. In 2005 he has started another well equipped Eye Centre at Guwahati by the name of Sight First. Dr Goswami is the evaluator of Scientific Committee of AIOS since the last 15 years.

Besides Ophthalmology Dr Goswami is a popular columnist of different news papers and periodicals. He is an amateur singer and magician too.

Since he started his professional career. He is closely associated with organizational, Scientific and Social activities of OSA.

¹ OSA is the present name of AAOS. The change of name came into effect in 2010, in compliance with the requirements of Societies Registration Act 1860 --Ed.

Achievement

AIOS-LDP

Dr Mayur Dutta Bharali was nominated by OSA for AIOS-LDP for 2019, as per decision approved in the Annual General Body Meeting held at Guwahati on 16.11.2019.



Dr. Mayur Dutta Bharali

This gives me immense satisfaction in informing you that I have completed the Leadership development programme of AIOS, class of 2020. It was an honour to represent Ophthalmological Society of Assam in this programme. Though due to the unfortunate circumstances with the covid pandemic many of the schedules of the programme were shifted to online, still it was a great leaning experience for me personally.

During the tenure I was invited as faculty in a ARC CATARACT symposium. Also I was given a opportunity to speak during AIOS 2022 during the completion programme. Overall it was a Enriching experience attending different programs and participating.

Finally I want to thank you and through you all the executive of osa for giving me this opportunity to represent osa at AIOS LDP.

The completion certificate is attached.

Thanking you,

Dr. Mayur Dutta Bharali



Recognition

The **International Society of Manual Small Incision Cataract Surgery (ISMICS)**
has introduced a Global award of excellence in Community Ophthalmology

“Harsha Bhattacharjee Community Ophthalmology Award”



The award will be in the form of ‘Best paper in Community Ophthalmology’, to be conferred on an outstanding community Ophthalmologist who will be selected from (at present) 16 different nations where the ISMSCS has its chapter.

The award will be presented to the Awardee in the international conference of the society.

This is in recognition of Dr Harsha Bhattacharjee’s vision on the subject and the impact of community service rendered by SSDN in the society.

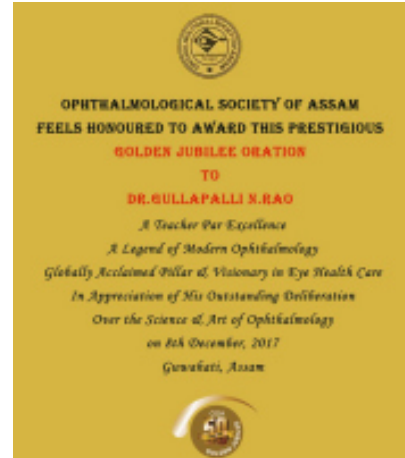
The announcement was made at the 4th Biennial World Conference of the (ISMICS) held at Chandigarh, India, from 4th-6th November, 2022

—Ed.

OSA Trust Oration



1st Oration - 2017, **Dr. G N Rao**, Guwahati



2nd Oration -2018, Silchar
Dr. Debasish Bhattacharya



3rd Oration - 2019, Guwahati
Dr. Namrata Sharma



4th Oration - 2022, Guwahati
Dr. Santosh G Honavar



The Sunrise Sector of Indian Economy – Healthcare Tourism-It's Other Side

Dr. Dipul Choudhury, M.S.

Towards the fag end of 2006 the finance ministry of India declared that India's G.D.P. for 2006-07 will be 8.9%. All over the world the economists are hyping about our rate of progress with that of China. Overtly looking at, it is undoubtedly a big news. But the big question is, has this rosy economic picture could bring relief to the masses? Has the majority of our people felt at least some of the economic sugar the nation has received? The most important thing of economic development of a nation should have been reflected in reduction of the unemployment rate and alleviation of poverty. The present rate of per capita food availability is 152 Kg. In 1950 it was 175 Kg. This shows that the purchasing power of our people is reduced.

Approximately 50% of our women and children are permanently suffering from malnutrition. More than 30% of our people cannot afford more than 1700 Cal. (as per W.H.O. standard it should be at least 2100 cal .per day) a day even after spending all their earning on food. According to Mr. Jean Ziegler, who filed a report to the U.N. Human Rights Council, Geneva that followed his tour of India from 20th of August to 2nd September 2006, "India has the largest number of undernourished people in the world and one of the highest level of child malnutrition". This cast a shadow of doubt about our Govt.'s claim about the reduction of the number of Indian people living below poverty line from 36% to 26%. Mr. Ziegler termed this is to be matter of debate.

In India every year about 20,00,000 (Twenty Lakhs) children dies of malnutrition. 30% of children are born underweight.

Indian medical tourism industry is in its infancy and the potential for growth is substantial. But here is the conundrum. In its latest report W.H.O. identifies India along with other poorest nations in Africa & South Asia as having greatest shortage of healthcare professionals. The density of physicians in India is 0.60 per 1000 people. In comparisons, The U.S.A. has 2.56 physicians per 1000 people. Most western nations have at least four times higher density of doctors than India. Even China has 1.05 doctors per 1000 of its population. More troubling is the fact that India has a huge populations suffering from Tuberculosis, Malaria, Leprosy, AIDS/HIV and other contagious diseases.

In comparisons to Western world the average life expectancy of Indian people is far behind and the infant mortality is very high.

More than 75% of healthcare spending in India is in private sector, in U.S.A. it is 44%. In India the out-of-pocket spending is whopping 97%, in U.S.A. it just 24% and in most European countries it is even less.

The massive gap between demand and supply of doctors and significantly higher private spending on healthcare raises numerous questions as healthcare tourism takes firmer roots. The need for five star hospital services and advanced medical devices will increase investment levels, which will

force providers to seek higher revenue generating foreign clients and there will be a greater pressure for increasing shareholder's value. **Since doctors reputations attract patients, there will be bidding war for well known doctors. All this will lead to increase in the cost of healthcare services for the local population.**

One needs to step back and ask ethical questions and consider social implications as some of the Indian states and industry associations are aggressively promoting medical tourism – is it in the best interest of the nation?

We do not want to question the right of the private sector to pursue what they feel is best for their shareholders and investors. We simply want to learn **what role the Government** should play in promoting/encouraging healthcare tourism?

Those who believe in free markets will definitely argue that controlling health care tourism “will be regressive. Here **I would like to pose a question** – assuming that there is a huge shortage of food grains world over and a famine like condition is prevailing in our own country also, but we need

huge amount of foreign exchange to cover our other pressing expenses. Should we allow our food grains to be exported to earn valuable foreign exchange, allowing our starving people to die? **If a ban on exports of food grains is desired in such a situations then a ban on medical tourism is also justified keeping in view the severe shortage of doctors in India.** Arguments will not lack in support of medical tourism that such a situation the yield from the high paying foreign clientele will subsidize the cost of medical services of the local population. The argument is sound if we ignore the fact of severe shortage of medical professionals in our own country. A big lot of socially conscious people feel that government should have no role in healthcare tourism. The same group of people also feel that the private sector should act carefully and more transparently otherwise if it is assumed that if that be the way of life then all of us should be prepared for social unrest, political upheaval and violence and we will not have anybody to blame except ourselves.

Establishing an Eye Care Set Up

Dr. Anup Jyoti Bora
Sibsagar

It is a dream of so many ophthalmologists to have his or her own eye hospital. Some achieve extraordinary success, others don't. Success stories are different for different people and so are their success secrets, but one thing is common for all, they provide something extra which attracts people than their neighbouring competitors. I also had the dream to be a successful owner of a hospital. After I passed out of medical college, I started my practice in an optical shop. I had a decent earning. But I was not happy prescribing only spectacles and treating conjunctivitis. Something inside me always made me restless. I took a risk and I opened my first hospital with the partnership of Dr Bhargav. I invested all my savings. I had to pay the EMI for the bank loan I took for purchasing Instruments. OPD footfall was also very less initially. Whatever little amount I could earn had to invest again for hospital upliftment. Economic condition was terrible for me. It took two long years to come to a stable point. Here, I will discuss some of my learnings and mistakes which might help the young ophthalmologist to establish their own set up.

The planning:-

If you want to be the boss of your hospital, then the planning should start just after getting your post-graduation degree. If you already learned the OPD procedures and the surgical skills in your medical college (which is not always possible), that is your advantage, but if not, then learn them before you start your hospital. Once you are into your practice, it becomes difficult to manage time for training or a long fellowship course. Family burdens become another factor if you postpone too much to

get trained. Also, it is a good idea to gather some amount in cash in hand before you start establishing your hospital, so that if you need a bank loan, the loan amount will be small and the EMI does not become a headache initially.

Location:-

Select the location very carefully because it will play an important role forever. It should ideally be in the heart of the city. People don't tend to go to an outskirt area. Also make sure it is easily noticed. An easily accessible location from all sides helps you to generate more traffic inside. A prior survey of the demography, affordability of the people of that part and other senior doctor's patient quality and quantity can help you to get a better location. Also see the neighbour's behaviour who can create problems in many ways later on.

Building design:-

Sufficient time needs to be given in planning the design. You can take help of an architect to manage your space and plan for future expansion. I did not call any architect and made many mistakes. Later I had to modify the interior so many times which was a waste of money, time and energy. You need to have enough space for patients waiting hall, doctor chamber and room for other OPD procedures. The OT complex can be on the upper floor to restrict unwanted entries. Install a lift facility even for a two storied hospital or keep space for it, if not possible to install before inauguration. From the beginning, design everything keeping NABH in mind so that it becomes easy to get the certificate later on. Nowadays parking space is a must to get

permission from Govt authority. Try to keep the parking area as big as possible.

Name:-

Select a name that feels like you have a big hospital. For a new customer the first impression comes from the name itself. If your hospital name is somewhat similar to a nearby hospital, it confuses the general public and some of your patients might go to the older hospital even though they wanted to come to your hospital.

Partners:-

Investments and worries can be shared by having partner(s). As compared to solo practitioner, in partnership, you can get more time for your skill and knowledge upgradation. You can take one or two partner(s) to start and run your hospital, but not more than that. Select a partner of contemporary age, who is trustworthy and dedicated. A supportive partner can help you to skyrocket your success whereas a bad partner will drag you down to hell. You cannot afford to make a mistake in selecting partner(s).

Staff:-

The supporting staff has a major role to play in a hospital. They need to be well dressed and have sweet behaviour. If possible give them a dress-code. Conduct meetings at regular intervals with your staff to know their problems and their suggestions.

Give them a decent salary so that they stay with you for a longer period of time. Most importantly, you need to give them proper training at your hospital or if not possible, send them to another institution for training. The doctor should not go to do everything by himself. Divide the duties among the staff. Take one or two extra staff and train them in such a way that they can manage the duty of an absent staff member.

Govt laws:-

There are some of the government rules you need to follow. First you need to have a trade license from the local authority. Then comes the Clinical establishment act where you pay your fees and show your staff. For tax related documents you have to take help of a CA. He will guide you to get your GST file. For GST you need to apply for a PAN card, have a bank account and other supporting documents. Fire NOC, pollution NOC and permission from the joint director office is a must to start your OT. Permission from the labour office is also necessary who will ask you to show the details of your staff and their salary pattern.

Being the boss carries lots of responsibility both to your staff and to the society. You will get both respect and worries together. This is called 'Life struggle' -for all.



Govt Compliances to set up an Eye Hospital

Dr Syed SajjadurRohman
Golaghat.

The Government of India has set down specific rules and regulations to set up an Eye Hospital in India. The first and foremost step is that every Hospital has to be registered under the Clinical Establishment Act. Initial registration is a Provisional one which has to be renewed after one year. But after the second year, it is mandatory to obtain the Permanent Registration which has a validity of 5 yrs, and has to be renewed again.

PERMITS REQUIRED

- 1) Land and Construction - a hospital can be set up only on a non Agriculture land - a proper layout of the hospital has to be planned and permission must be obtained from the local authority and government.
- 2) Electricity and Water - permission must be obtained from the concerned municipal authority.
- 3) Sewage - well planned sanitary measures and drainage system is required and permission from local authority to be obtained.
- 4) Biomedical waste - municipal corporation permission is required for method of disposal of wastes
- 5) Fire Safety Registration -NOC required from Chief Fire Officer
- 6) Pollution Control Certificate - NOC required from the Pollution Control Board as per the Pollution Control Act
- 7) FSSAI License - i.e. Food Safety and Standard

Authority of India under the Ministry of Health and Family Welfare, GOI. It is necessary if the hospital runs an in- house kitchen for patients and attendants.

- 8) Pharmacy Registration - it comes under office of the Drug Controller and is valid for 5 yrs.
- 9) Vehicle Registration for Ambulances-ambulances must be registered under Regional Transport Office and State Government
- 10) Arms License - if Arms are possessed by the hospital security guards or it's employees
- 11) ESI Act 1948 - for its contractual employees
- 12) Minimum Wages Act 1948 - for its contractual employees
- 13) Transplantation of Human Organs Act 1994
- 14) Indian Nursing Council Act 1947 - to check whether the nurses are registered with the NCI.
- 15) Information to be displayed at the Hospital - Certificate of Registration of Hospital with municipal authorities - Charges for consultation and other procedures/ services - Clinic timings, holidays

Every Eye Hospital must obtain these basic norms. Besides these, there are various other permits which are required by General Hospitals and Maternity Home. Violation of any of these norms can lead to imposition of strict fines or even cancellation of license, in cases of serious offences.



ICCE

Anubha Das
Kokrajhar

I joined Rup Nath Brahma civil Hospital Kokrajhar on January 1991 after Post graduation in Ophthalmology on deputation after completion of five and half years of service in a rural area (Primary Health Centre) of Kokrajhar district. At that time Kokrajhar district was a very disturbed area. I was a bit late in going to the Secretariat to enquire about my new place of posting. As I approached the Superintendent of Health A of the Secretariat he asked me where I would like to be posted. I replied I would like to be posted anywhere in Kokrajhar district. He was surprised and announced loudly 'She should be awarded President's award.' Later on I came to know from the new post graduate doctors who were running from table to table in the Secretariat that, they were all posted in different places of Kokrajhar district and were trying to change their place of posting.

In the district level review meeting at Kokrajhar every month two Eye Camps were announced and we, the two Ophthalmologists had to go to different interior places of the district to perform cataract operation.

At that time we used to perform Intra Capsular Cataract Extraction with Cryoextraction or Push and Pull technique.

We used to perform operation in Primary Health centers or in School classrooms standing at one end of the desk and patients had to lie down in desks. Instruments were sterilized by boiling in kerosenestoves. Volunteers used to take big metal torches as light source, probably 3 or 4 battery Eveready metal torches as the torch of a night

choukidar who actually can hit someone with it like a 'Goda.'

After the operation was over at around 3 or 4 pm we used to have lunch provided by the village people, most of whom used to deal us as if we were incarnation of God. At that time most of the patients we operated in interior places were bilaterally blind and the people knew from their previous experience of such camps or had heard from mouth to mouth that such and such blind man regained vision after operation.

Ophthalmic Assistant stayed overnight and discharged patients next morning. After 6 weeks glasses were provided, mostly +10.00 dioptre spherical for distance and +13.00 Dioptre spherical for near vision. In most cases vision both distance and near were perfect after glass correction and people were happy.

There are some experiences of post operative cases which I remember vividly even now. Just after joining I operated a man of about 60 years. A bilaterally blind man with very dirty clothing was brought to my examination table in OPD by two persons almost dragging. He was operated and was discharged next day. On first check up after 5 days a man standing tall with meticulously clean clothes (dhoti kurta) with black goggles approached me. I could not believe that he was the man with dirty clothing that I operated few days back. I asked him who was accompanying him. He replied with a loud laughter that he came alone.

Just few days after aphakic glasses were

prescribed, one day he came cycling from his village about 8 km away to take medicine for other ailment.

I have also personal experience of aphakic case in my family. My father had cataract operation of both his eyes at a comparatively young age done by our respected Prof. Lakhan Dutta sir. I was then in Lower Primary school. My father had perfect vision after operation. He was a graduate from Iswarchandra Vidyasagar College Calcutta , left his Govt job as Textile Inspector to start his business (Timber merchant).He had to go to the jungle in his petrol truck once or twice in a month during the season to supervise the activities , had to go to Dhubri

(District head quarter) and Shillong (State Capital) frequently. He was an ardent reader ,was very active socially ,was associated with establishment of boys school ,girls school ,college ,public hall and namghar.For all these he was very busy and was constantly on move. He did all these things with his thick and heavy aphakic glasses.

We owe wellbeing of our father and wellbeing our family to our respected Prof Lakhan Dutta sir.

Dr. Anubha Das retired as Chief Medical and Health Officer , Kokrajhar district on 30.11.21. -- Ed.





Seeking the balance: Science and Spiritualism

Jico Gogoi

India is the richest country when we speak of spiritual tradition, from the Vedic times. Every human emotion and aspiration has been covered by our scriptures, because of which India has always attracted people from all over of world to come here seeking for spiritualism. After the Vedic age, great spiritual thinkers like Nachiketa, Gargi, and Maitereyi have further nurtured the Indian spiritualism. When puja was offered at the Tirupati Temple by the Chairman of ISRO, K Sivan before launching Chandrayaan 2, the international media houses raised the question if a renowned and globally appreciated scientific organization really needs God's blessings for its success!

Now, spirituality should not be confused with Religion. Every religion is based on scriptures which has certain teachings, with its own rules and law. On the other hand, spirituality is a way of life. It is the science of human growth for self transformation and in a way transferring the entire world though Peace & Purity. When we break the Sanskrit word for spiritualism 'Adhyatm', it consists of 'Adhi' and 'Atman' which means something which is appropriate for the soul and this soul is our inner voice that keeps telling us what is right & wrong, what to do and what not to.

Now, in today's world, we cannot imagine our life without science. Science has led to evolution of entire mankind, with the newest focus on artificial intelligence, robotics and machine learning. Countries have become nuclear powers, further bittering the relationships among other states ready to go to war with each other. So, spiritual diplomacy is much required to be promoted for betterment of the entire humankind. M.K Gandhi has once said that if both

science and spirituality go hand in hand, then one can create heaven on the holy earth. Science without spirituality is not only incomplete but also vulnerable, aiming to satisfy one's greed rather than need. Mankind, still has not been able to answer vast mysteries of the world and life even with all the scientific knowledge. The industrial revolution, modern lifestyle, self-centeredness and aloofness of today has made man emotionally mentally weak. Spirituality fills the gaps answers the curiosity of the human mind positively.

So, people sought refuge to spirituality for solace. It provides one with a complete philosophy of human life, the correct way of



living and the right way of thinking. This makes one detached from the effects of success or failure, devoid of self-interest and ego hood and provides with a plethora of positivity. It is an experience as expressed by Swami Vivekananda as a feeling of growing from inside out and none can teach us or make us spiritual, there is no teacher better than our own soul. It helps us to find a meaning in life, provides a foundation of our values to guide us the way to behave with self, others and the world around us. Sustainable development of the human race and the world is only possible with the coordination of science and spirituality.

E-mail : jico.neo@gmail.com

বেদনাসিক্ত

অন্ন মহন্ত

তেজপুৰ

চন আছিল ১৯৬০ মাৰ্চ মাহৰ বতাহ বলি থকা ৰাতিপুৱা এটাত ছাত্ৰীনিৱাসৰ লেণ্ডলাইন ফোনটো বাজি উঠিল। ছাত্ৰীসকলৰ অধ্যক্ষা আকতি দত্তই খবৰটো গ্ৰহণ কৰি ছাত্ৰীবাসৰ আৱাসী অনিমা বৰাক ফোন থকা কোঠালিলৈ মাতি আনিলে আৰু গাত হাত ফুৰাই ক'লে অনিমা জন্ম, মৃত্যু, আমাৰ জীৱনৰ অৱধাৰিত। তুমি নাকান্দিবা, তোমাৰ দেউতা ঢুকাইছে নিউমেনিয়াত। তোমাৰ লোকেল গাৰ্জেনৰ ফোন নম্বৰটো দিয়া, তোমাক অকলে তেজপুৰলৈ যাব নিদিও। অনিমাই বাইদেউক সাৱটিধৰি কান্দোনত ভাগি পৰিল আৰু কান্দোনৰ মাজতে জেঠায়েকৰ ফোন নম্বৰটো দিলে। ফোন পোৱাৰ এঘণ্টাৰ পাছতে জেঠায়েকৰ ল'ৰা মহিম চৌধুৰী আহিল আৰু অনামিকাক ক'লে ওলোৱা সোণকালে। নহ'লে ফেৰী নাপাম। তেতিয়া ব্ৰহ্মপুত্ৰৰ দলং হোৱা নাছিল বাবে গুৱাহাটীৰ পৰা তেজপুৰলৈ যাবলৈ হ'লে ফেৰীৰে পাৰ হৈ সিপাৰে বৈ থকা বাছত উঠিব লাগিছিল। বৈ থকা নাৱতো উঠি পাৰ হৈছিল কোনোবা কোনোবা। অনিমাই হ'ল ফেৰী ঘাট পাৰ পাই মানে ফেৰী উত্তৰ গুৱাহাটীলৈ ইতিমধ্যে ৰাওনা হৈছে। অনিমাই মহিমৰ হাতত ধৰি কান্দি কান্দি ক'লে দাদা আমি নাৱত পাৰ হৈ যাও ব'লা। দেউতাক মই ইমানদিন দেখা নাই, এতিয়া মৃত মুখখনো নাচাম নেকি? নাৱত যোৱা বিপদজনক তাতে বতাহো বালি আছে। অনিমাৰ অৱস্থা দেখি বৈ থকা নাৱৰীয়াক কাকুতি-মিনতি কৰি ক'লে আহক দাদা, মই খুব খুব ভালকৈ সাৱধানে পাৰ কৰি দিম। মহিমে অনিমা আৰু নাৱৰীয়াৰ কথা এৰাব নোৱাৰি নাৱত উঠিল। কিন্তু অলপ দূৰ যোৱাৰ পাছত বতাহ বৰকৈ বলিব ধৰিলে আৰু নাও তল ওপৰ হোৱাৰ নিচিনা হ'ল। ভয়ত অনিমাই চিঞৰি চিঞৰি কান্দি ধৰিলে। মহিমে নাৱৰীয়াক ওভতাই পাৰলৈ নিবলৈ ক'লে। নাও পাৰ পোৱাত নাৱৰীয়াই যাওঁ দিয়ক

বুলি যাবলৈ ওলোৱাত অনিমাই নাৱৰীয়াক পুৰা ভাড়া দিবলৈ মহিমক ক'লে। ভাড়া লৈ নাৱৰীয়া গ'ল।

পাছদিনা ফেৰীৰে পাৰ হৈ অনিমা মহিমৰ সৈতে ঘৰ পালে যদিও মৃতদেহ আগদিনাই সংকাৰ কৰা হ'ল। অনিমাই মাটিত বাগৰি ইনাই বিনাই কান্দিলে। অনিমাৰ বায়েক-ভিনিয়েক, মহিমহঁতে বুজালে, তুমি যদি এনেকুৱা কৰা, তেন্তে তোমাৰ ভায়েৰা, ভনীয়েৰাহঁতে কি কৰিব। সিহঁতৰ মুখলৈ চাই তুমি শান্ত হোৱা আৰু বাকী কাম কাজৰ বিষয়ে ভাব। সকলোৰে সহযোগত কাম কাজ সুকলমে সমাধা হ'ল। আৰু অনিমা পঢ়া সমাপ্ত কৰিবলৈ গুৱাহাটীলৈ ঘূৰি গ'ল।

আজি চল্লিশ বছৰৰ পাছত এই ঘটনাবোৰ কিয় মনত পৰিব ধৰিছে। দুৱাৰ মুখত বুঢ়া মানুহ এজনে আই আই- মাত দিয়কচোন বুলি চিঞৰি আছে। অনিমাই কাম কৰা ধাইজনীক ক'লে, ধনেশ্বৰী যা চোন দুৱাৰখন খুলি কোন আহিছে চা। তাই আহি ক'লে আইতা বুঢ়া মানুহ এজন আহিছে। দৰ্জাখুলি দি বাহিৰৰ সৰু ৰুমটোতে বহিব দিম নেকি? য বহিব দে গৈ, মই গৈ আছো? বাহিৰৰ ৰুমটোলৈ গৈ মানুহজনক চিনি পাও নেকি লক্ষ্য কৰিলোঁ। মানুহজন থিয় হৈ নমস্কাৰৰ ভঙ্গীত হাত দুখন তুলি ক'লে, 'আই মোক চিনি পোৱা নাই নহয়। মই আপোনাক চিনি পাইছোঁ। আপোনাৰ ঘৰৰ কাষৰ টিনৰ চালিৰ কেচা ঘৰ এটাত মোৰ ছোৱালীজনী থাকে। ক'ৰবাত ক'ৰবাত পাৰ্ট টাইম কৰে। জোঁৱাইয়ে হাজিৰা কৰে। আপোনাৰ নামটো মোৰ এতিয়াও মনত আছে। অনিমা আই নামটো কওঁতে এই বিল্ডিঙৰ মালিকনীৰ নামো অনিমা বুলি ক'লে। আই আপোনাৰ মনটো বৰ কোমল মানুহৰ প্ৰতি দয়া মৰম আছে। এতিয়াও মনত আছে, নাৱত পাৰ নোহোৱাকৈয়ে নাৱৰ পুৰা ভাড়া দি দিয়াৰ কথা। আই

আজিকালি শৰাইঘাট দলঙ হোৱাৰ পৰা আমাৰ নাৱৰ ব্যৱসায় নচলা হৈছে। বৰ অভাৱত আছে আই। কিবা অলপ সহায় কৰিব পাৰে যদি? মেচিন নাও আহিল যদিও এতিয়া সেইবিলাক বিলাবলৈ পইচা নাই। কি কৰি খাম, এনেকৈ মাজে মাজে খুজি মাগি ফুঁৰো। অনিমাৰ অন্তৰে কান্দি উঠিল। ভাবিলে দেউতাকক হস্পিতালত থাকোতে গৰম কাপোৰ কেইখনমান কিনি দিয়া হ'লে হয়তো নিউমেনিয়া নহ'লেহেঁতেন। মুখেৰে ক'লে বাৰু বহা- ধনেশ্বৰী এওলোকৰ কাৰণে চাহ-জলপান লৈ আহাগৈ। যাওঁ কিন্তু বোঁয়ে বা কি কয়, পাকঘৰত কিবা কৰি আছে। চাহ জলপান নালাগে আই। কিবা অলপ সহায় কৰক। হ'ব বাৰু ব'বা বহা। এইবুলি ভিতৰলৈ গ'ল আৰু পাঁচশ টকা এটা লৈ আহিল। ইতিমধ্যে চাহ জলপানো আহিল। টকা পাঁচশ পাই নাৱৰীয়া বুঢ়াই ভুৰি ভুৰি আশীৰ্বাদ দিলে। অনিমাই ক'লে ছোৱালীৰ তাত আহিলে ইয়াতো সোমাৰ। আৰু আহিব পাৰোনে নাই, দেহা পৰি আহিছে বুলি জীয়েকৰ লগত বুঢ়া ওলাই গ'ল। অনিমাই মনত এটি সন্তোষিত ভাৱ অনুভৱ কৰিলে। ভাবিলে মানুহে মৰোতে লগত টকা-পইচা, সা-সম্পত্তি একো লগত নিব নোৱাৰে। কিন্তু মানুহৰ ভালপোৱা, মৰম চেনেহৰ

অনুভূতি, প্ৰশংসা আশীৰ্বাদৰ ভাৱ লৈ মৰিব পাৰিলে ভাল। ভগৱানে যাতে মোক ইয়াৰ পৰা বঞ্চিত নকৰে বুলি কোঠাৰ আৰামী চকীখনত বহি পৰিল। এনেতে ক্লাছ ফাইভত পঢ়া নাতি দীপু আহি কোলাত বহিল আৰু ক'লে আইতা আমাৰ ক্লাছৰ সকলোৰে মবাইল আছে। মোকো এটা তুমি কিনি দিয়ানা? নাই নাই ইমান সৰুৰ পৰা ম'বাইল টিপি থাকিলে চকু বেয়া হ'ব।


বোৱাৰীয়েক মণিকাই মাত দিলে, আপুনি দান দক্ষিণা কৰি থাকিব পাৰে, নাতিটোৰ বেলিকাছে কৃপণালি নহয় নহয় বোৱাৰী মই তাৰ ভালৰ বাবেহে কৈছোঁ। তাৰ ভাল বেয়া ভাবিলে আমিও আছে নহয়। আজি কালি যুগৰ লগত খোজ মিলাই সৰুৰে পৰাই ডিজিটেল হ'বই লাগিব। তোমালোকে যিটো ভাল ভাবা কৰা। মোৰ মতে যিটো ভাল সেইটো মোক কৰিব দিয়া। তাক সাঁতোৰত, খেলা-ধূলা, সঙ্গীত আদিত যোগ দিবলৈ যিমান লাগে সেইয়া মই দিবলৈ সাজু আছে। কালিয়েই এই বিলাকত ভৰ্তি কৰা ই দিয়া। বুজিছ দীপু সুস্থ, শৰীৰত সুষ্ঠ মন এটা থাকিবলৈ এইবোৰ কৰিব লাগে।

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Taj Optical

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Near SBI, Bhangagarh
Guwahati - 781 005

Eye Dr. Time
4:30 P.M. To 7:30 P.M.





সকলোৰে কওক মনৰ কথা

ডাঃ সৌৰভ কুমাৰ ভূঞা
তেজপুৰ

পৃথিৱীৰ বাবে, জীৱনৰ বাবে, তোমাৰ বাবে
আৰু সৌতেওঁৰ বাবে,
আনকি মোৰ নিজৰ বাবেও
মই কব খোজো দুটা কথা
সকলো সংকোচ আঁতৰাই তুমিও ক'বা দুটা কথা
আমাৰ কথা শুনি হয়তো তেওঁ ক'ব দুটা কথা...
আৰু পৃথিৱীখনেও মানুহৰ কথাৰ সাগৰত
আকৌ এবাৰ গাটো তিয়াব...

সকলোৰে ক'লে মনৰ কথা
কোনে জানে পাহৰণিৰ অটল গৰ্ভত
আমি এদিন এৰি থৈ আহিব পাৰিম
শতিকাৰ নিঃছিদ্ৰ এক্সাৰ...
হয়তো গুছাই দিব পাৰিম
মানুহৰ মনৰ যত এলাস্কু কলীয়া মকৰাজাল,
সেউজীয়া কৰিব পাৰিম
পৃথিৱীৰ সকলো টকলা পাহাৰ আৰু বৰ্ষাৰণ্য,
বাতি-বুতি ল'ব পাৰিম অ'জনৰ সকলো সৰু-বৰ বন্ধ
আৰু ৰাখিব পাৰিম সাগৰ বোলহৰৰ বাধিত লয়...

কোনে জানে পৃথিৱী এদিন আকৌ সুন্দৰ হ'ব
যাৰ চোতালত আকৌ আহি উমলিবহি
জননীৰ আনন্দ উচ্ছল উত্তৰাধিকাৰীয়ে...



চকুত তোমাৰ মাগুৰ বৰণীয়া হাঁহি

ডাঃ মনীন্দ্র নাৰায়ণ বৰদলৈ
লক্ষীমপুৰ

মাস্কৰ আঁৰৰ
দেখা নোপোৱা হাঁহিটোহে তোমাৰ
অকৃত্ৰিম যেন লাগে
যেতিয়া সেই লিপ্‌ষ্টিক নহয়

বৰং মাগুৰবৰণীয়া চকুযোৰেহে হাঁহে

দুচকু উজলাই
তোমাৰ বুকুৰ ভিতৰৰ পৰা
ওলাই আহে জোন বেগি তৰা

খিৰিকিৰ পৰ্দাৰ ফাকেৰে অহা
কাঁড় পাতৰ তীক্ষ্ণতাই
ধুমুহাৰ তীব্ৰতাৰে
যেতিয়া ভেদি যায় বুকু
এক অনিৰ্বচনীয় গানে গুণগুণাই
মোৰ বাহিৰে ভিতৰে

ওৰণিটানি
ওঁঠত দুপাঁহ বন্ধ জবা

চকুত তোমাৰ
মাগুৰ বৰণীয়া হাঁহি

ব্যতিক্রমী

অন্ন মহন্ত
তেজপুৰ

স্বার্থৰ দীঘলীয়া শিকলি দালেৰে
মই বগালোঁ, বগাই বগাই
সফলতাৰ শিখৰ চুই মই
বিহ্বল হ'লো, লোকৰ ভুলৰ
মুগুত মই তাণ্ডৰ নৃত্য কৰিলোঁ।

অভিজ্ঞতাৰে পৃষ্ঠ মোৰ অভিধানখন
মেলি চালো, তাত মোৰ
ক্ষমা শব্দটো বিচাৰি নাপালোঁ।

স্বার্থ পুৰাই মই মানুহৰ
সৰলতা, বেদনাত আটুহাঁহি মাৰিলোঁ
মই জীৱন-যুদ্ধৰ সফল নায়িকা
ৰূপে পৰিচিত হ'লো, মানুহ মোৰ
সফলতাৰ জখলা, সিহঁতৰ আবেগ
অনুভূতি স্বার্থ পূৰণৰ আহিলা।



‘মুৰুগান’ৰ দেশত : কিছু স্মৃতি কথা

ডঃ ৰূপেশ্বৰ বৈশ্য

ভগবান ‘মুৰুগান’ৰ দেশ দাক্ষিণাত্যৰ (Murugan the Hindu God of war, the son of Shiva born from his third eye) তামিলনাডুৰ কয়ইস্বাতুৰত দুমাহ আছিলো ২০১৭ চনৰ শেষৰ ফালে। National programme of control of Blindness of Indiaৰ অনুমোদন ক্ৰমে তামিলনাডুৰ মাদুৰাইত থকা “Arvind Eye Hospital” ত ‘কেটেৰেক চাৰ্জাৰী প্ৰশিক্ষণৰ বাবে মোক 1st October, 2017ত উপস্থিত হ’বলৈ NPCBৰ দিল্লীৰ কাৰ্য্যালয়ৰ পৰা মোক ফোন কৰি জনোৱা হয়। দুমাহৰ বাবে এই প্ৰশিক্ষণ চলিব। শেষ মুহূৰ্ত্ত্যত মাদুৰাইত slot খালী নথকাত কয়ইস্বাতুৰত থকা Arvind Eye Hospitalত প্ৰশিক্ষণৰ বাবে যাবলৈ মোক নিৰ্দেশ দিয়া হয়।

২৯/০৯/২০১৭। কিন্‌কিনীয়া বৰষুণ দিবলৈ আৰম্ভ কৰিছে। Flight Cancel নহ’লেই বন্ধা। পৰিয়ালক মাত লগাই আবেলি ৩ বজাত লোকপ্ৰিয় গোপীনাথ বৰদলৈ আন্তৰাষ্ট্ৰীয় বিমান বন্দৰলৈ বুলি ওলালো। ‘Air India’ ৰ টিকট কলিকতা হৈ প্ৰথমতে বেংগালুৰু, বেংগালুৰুৰ পৰা আকৌ চেন্নাই লৈ বেলেগ Flight (AI-564)। তাৰ পিছত পিছদিনা ২.৪৫ বজাত আবেলি আন এখন Flight (AI-9551) মাদুৰাইলৈ টিকট আছে। মাদুৰাই গৈ পাম আবেলি ৪.১০ বজাত। যথায়মত গৈ “Security Check in”ত সোমালো। বৰ্ডিংৰ সময় ৩০ মিনিটত পলম। কলিকতালৈ যাব লগা ওচৰৰ ভদ্ৰলোকজনে ক’লে— “Govt. Sector’sত সকলো কথাৰে পলম, পালমৰা। আধাঘন্টা পলমকৈ কলিকতা পালো। দুৰ্গাপূজাৰ সময়ৰ ৰাতিৰ কলিকতাৰ দৃশ্য সাঁচাকৈ অতি উজ্জ্বল আৰু ৰঙীন। লেনডিঙৰ সময়ত আকাশৰ পৰা সেই অপূৰ্ব, নয়ান্ভিৰাম দৃশ্য উপভোগ কৰিলো। শাৰদীয় মায়াময় নিশাৰ কলিকতাৰ দুৰ্গাপূজাৰ আলোকসজ্জিত ৰূপ সাঁচাকৈয়ে মোহনীয়। ৪৫ মিনিট সময়

ফ্লাইটৰ ভিতৰতে বহি থাকিলো। তাৰ পিছত বেংগালুৰুলৈ উৰা মাৰিলো। সময় লব ২ ঘন্টা ৩৫ মিনিট।

৩০/০৯/২০১৭। কেবিন লাগেজটো লৈ “Security Check in”ত শাৰী পাতিলো মাদুৰাইলৈ বুলি। সময়মতে বডিং হৈ গ’ল। এখন সৰু কাৰ্গোপ্লেনত (AI-9551) আবেলি ২.৪৫ বজাত মাদুৰাইলৈ যাত্ৰা আৰম্ভ হ’ল। একঘন্টা ২৫ মিনিটত মাদুৰাই পালো, The temple city of India। বিমান বন্দৰৰ পৰা বাহিল ওলাই টেক্সি এখন ললো। মাদুৰাইত গৰম আছে। চেণ্ট্ৰেল মাদুৰাইলৈ গলো, তাত ‘Hotel Kaveri Mahal’ত এটা AC ৰুম ললো। মীনাক্ষী মন্দিৰ (Meenakshi Temple)ৰ ওচৰতে হোটেল খন। তেতিয়া আবেলি ৪.৩০ বাজিছে। গা-পা ধুই ৬.১৫ বজাত বাহিৰলৈ ওলাই গলো। গধূলি ‘Meenakshi Temple’ লৈ যোৱা যাত্ৰীৰ বহু ভিৰ। মাদুৰাই এখন সৰু চহৰ। গুৱাহাটীতকৈ সৰু। গুৱাহাটীৰ দৰেই লেতেৰা, য’তে ততে জাবৰৰ দম। মন্দিৰৰ চৌপাশ অৱশ্যে খুব পৰিষ্কাৰ। মাদুৰাইখন এখন পুৰণি উৰলিয়োৱা চহৰ যেন লাগে। তাৰ চৰকাৰী অফিচ-ঘৰবোৰ আগৰ পুৰণি মডেলৰ, মেৰামতি নকৰা। চাৰিওফালে কেবল জুৱেলাৰীৰ দোকান, উপযনাৰ বাবে সৰু সৰু মন্দিৰ, প্ৰাৰ্থনা গৃহ। মাজে মাজে কিছু গীৰ্জাঘৰ। চেণ্ট্ৰেল মাদুৰাই মানে Meenakshi Templeলৈ যোৱা মূলপথটো খুবেই ব্যস্ত, যান-বাহন, মানুহ, যাত্ৰীৰ এখন বিশৃংখল পৰিৱেশ। ঠিক আমাৰ ফাঁচীবজাৰৰ টকৌবাৰীৰ দৰে লাগে। প্ৰায়বোৰ দোকানৰ সন্মুখত ফুলৰ মালাৰে কলপুলি বন্ধা। ছোৱালী, তিৰোতাৰ খোপাত গুটিমালতী ফুলৰ সুগন্ধি ফুলৰ থোপা। মন্দিৰৰ চৌপাশত ভিক্ষাৰী নাই। দুই-এটা বেপাৰী (Street Vendors) দুন্দুৰী তিৰোতাই কাজিয়া কৰি থকা দেখিলো। ভাল ট্ৰেফিক চিগ্‌নেলৰ ব্যৱস্থা নাই। চাইনবোৰ্ডবোৰ চাই একো বুজিব নোৱাৰি মই ক’ত

আছো, চব লিখা আছে তামিলভাষাত, কৰবাতহে ইংৰাজীত। হিন্দীৰ নাম-গোন্ধ নাই। ডাঙৰ ৰেষ্টুৰেণ্ট বা মলৰ বাহিৰে হিন্দী কোনেও বুজি নাপায়, নকয়। সাধাৰণ লোকৰ (Public) লগত কথা পতা বৰ দিগ্দাৰ, কাৰণ সিহঁতে ইংৰাজীও ভালকৈ নাজানে। গধুলিয়েই ‘মীনাক্ষী মন্দিৰ’ৰ চৌপাশে এপাক মাৰি ঘূৰি আহিলো। নিশা ৯.৩০ বজাত Nethaji Road Maduraiৰ ওচৰতে থকা পাঞ্জাবী হোটেলত খাবলৈ সোমালো। সম্পূৰ্ণ নিৰামিষ আহাৰৰ হোটেল। পাঞ্জাবী খানা খাবলৈ ইয়াত বহুমানুহে ভিৰ কৰেহি। ৰাতি প্ৰায় ১১.৩০ বজালৈ খোলা থাকে। হোটেল কাবৰী মহললৈ ঘূৰি আহি সোনকালে বিচনা ললো। প্ৰচণ্ড ভাগৰত কেতিয়া টোপনি গলো গমকে নাপালো।

১/১০/২০১৭, দেওঁবাৰ।

পূৰা ৭.০০ বজাত উঠি মুখহাত ধুই চাহ একাপ খালো। গা-পা ধুই মীনাক্ষী মন্দিৰৰ ফালে (South Tower) ওলাই গলো। চহৰখন বহু পৰিমাণে Polluted, Engested ভিতৰত গছ-গছনি একেবাৰেই নাই। গৰম বেছি। মন্দিৰৰ ওচৰৰ হোটেল এখনত কলপাতত দিয়া দোচা এখন খাই ললো। বাটত খোৱা নহ’বগৈ, কাৰণ সোনকালে কইস্বাতুৰ পাব লাগে। বন্ধৰ যদিও আজিৰ পৰা ট্ৰেইনিঙ আৰম্ভ। ১০ বজাত Room Checkout কৰি টেম্পো এখনত বাছষ্টেণ্ডলৈ গলো, ১৫ মিনিটৰ বাট। অটো ড্ৰাইভাৰজনে কয়ইস্বাতুৰলৈ যোৱা চুপাৰ বাছ এখন উঠাই দিলে। (By pass Highway Rider) বাছষ্টেণ্ডটো একেবাৰে জৰাজীৰ্ণ, প্ৰায়বোৰেই পুৰণি আৰ্হিৰ বাছ যদিও চাৰ্ভিছ ভাল, বেছি ৰৈ ৰৈ নাযায়, থিয় হ’ব লগাকৈ মানুহ নুঠায়। পিছৰ গাড়ীবোৰ সময়মতে আহি থাকে। কিছুদূৰ যোৱাৰ পিছত Four-Lane Highway পালো। কাষে কাষে শাৰী শাৰী নাৰিকলৰ বাগিছা, কলৰ বাগিছা বোৰ চাই চাই গৈ থাকিলো। আঢ়ৈ ঘন্টামান যোৱাৰ পিছত ধাৰাপুৰম পোৱাৰ আগতে চাহ-পানীৰ বাবে ডাঙৰ হোটেল এখনৰ ওচৰত ৰ’ল। আবেলি ৪ মান বজাত কইস্বাতুৰ পালো। লাষ্ট ষ্টপেজ। তাৰ পৰা অটো এখন লৈ ওলালো ‘Arvind Eye Hospital’লৈ বুলি। মই R.S. Puram বুলি কলো ঠাই টুকুৰা, ড্ৰাইভাৰজন অলপ confused হ’ল, তাতে ইংৰাজী, হিন্দী নাজানে। মই ডাঃ

প্ৰাঞ্জললৈ ফোন কৰিলো। প্ৰাঞ্জলে কলে R.S. Puram নহয়, তাত থকাখন AEHৰ এটা সৰু শাখাহে। মূলখন আছে বিমান বন্দৰৰ ওচৰত, মূল চহৰৰ পৰা ১০ কিঃমিঃ দূৰৈত। প্ৰাঞ্জলে ড্ৰাইভাৰজনক কিছু তামিলমিহলি ভাষাত কথাটো বুজাই দিলে। শেষত Arvind Eye Hospital পালো। ড্ৰাইভাৰক বিদায় দি AEHৰ Information Counterলৈ গলো। তাত থকা ছোৱালীজনীয়ে ভালকৈ ইংৰাজী বুলি নাপায়, ইংৰাজী উচ্চাৰণ একেবাৰে অদ্ভু। মই এটা এটা শব্দকৈ জোৰকৈ উচ্চাৰণ কৰি ইংৰাজীতে ক’লে— I am a trainee doctor, coming from Guwahati, Assam for training in SICS here... মোৰ কথাটো সিহঁতক হেনো আগতিয়াকৈ কৈ থোৱা আছিল Hospital Outhorityৰ পৰা। লগে লগে সিহঁতে বুজি পাই House Keeperলৈ ফোন কৰি মোৰ কথাটো জনালে। কিছুসময় অপেক্ষাৰ পিছত হস্পিটালৰ দ্বিতীয় মহলাত মোক এটা কেবিন দিয়া হ’ল থাকিবলৈ আৰু ক’লে পিছত আপোনাক PG Hostelলৈ transfer কৰা হ’ব।

০২/১০/২০১৭, সোমবাৰ

পূৰা গা-পা ধুই এপ্ৰমনটো পিঙ্কি Trainee Dept.লৈ গ’লো। ভিতৰফালে Web lab, এটা সৰু Library, এটা Audio-visual room, সোঁফালে Office cum inquiry। কনফাৰেন্স ৰুমত বহি থকা লৰাজনৰ লগত চিনাকি হৈ কথা পাতিলো, ঘৰ কৰ্ণাটকত। ‘মেডিকেল ৰেটিনা’ৰ ওপৰত ট্ৰেইনিঙ ল’বলৈ আহিছে। Private Sectorত কাম কৰে। এনেতে আমাৰ মহিলা Co-ordinator জনী আহি পালে। আমাক লৈ যোৱা হ’ল হস্পিটালখন দেখুৱাবলৈ। এইবাৰ আৰু দুজনী Trainee doctor সোমাই আহিল Conference roomলৈ। এজনী নাইজেৰিয়াৰ, এজনী দক্ষিণ আফ্ৰিকাৰ খুলন্তৰ চেহেৰাৰ। এজনীৰ Sub-Speciality Phoco Surgery আনজনীৰ ROP। গোটেই Trainee Groupটোক এটা সুন্দৰ ভিডিঅ’ দেখুৱালে— কেনেকৈ, কি কঠোৰ পৰিশ্ৰম, অপূৰ্ব সেৱাৰ উদ্দেশ্যে আগত ৰাখি Arvind Eye Hospital বোৰ স্থাপিত হ’ল, সাধাৰণ মানুহৰ (দাক্ষিণাত্যৰ) জীৱন শৈলী, জন-সংস্কৃতি, সাধাৰণ জনতাৰ অসুস্থতা, পুষ্টিহীনতা, অন্ধত্বই

কেনেদেৰে গাঁৱলীয়া লোকৰ জীৱন দুৰ্বিহ কৰি আহিছে, সুন্দৰ, বিনন্দীয়া পৃথিৱীখনক আকৌ এবাৰ হেপাহ পলুৱাই চাবলৈ বৈ থকা এজাক দুৰ্ভগীয়া মানুহৰ সপোন কেনেদেৰে ফলিয়াব পাৰি তাৰ সুন্দৰ বিস্তৃত বিৱৰণ (Documentary) দিয়া হৈছে। “Arvind Eye Hospital”ৰ স্বপ্নদ্রষ্টা জনৰ (Founder person) জীৱন কাহিনী সুন্দৰভাবে উপস্থাপন কৰা হৈছে।

তাৰপিছত ‘Free hospital section’ৰ অফিচলৈ গলো। তাত ৭০০ মান টকাৰ canteenৰ কুপন কিনিলো। খোৱা-লোৱাৰ বাবে (Breakfast Rs. 24/=, lunch Rs. 40/=)। তাৰপিছত OT লৈ গৈ sister-in-charge Sakunthalaক লগধৰিলো। চাৰিটা বৃহৎ ‘Barrier Zone’ পাৰ হৈ ‘G’OT লৈ মোক লৈ যোৱা হ’ল। তাত মোৰ course faculty Dr. Jayanthi মেদামৰ লগত সাক্ষাৎ হলো। এইজনেই হ’ব মোৰ Surgical skillৰ গুৰু। মই নমস্কাৰ এটা দি থিয় হৈ ৰলো। মোৰ নাম আৰু ক’ৰ পৰা আহিছে সুধিলে। “ইমান দূৰৰ পৰা আহিছা, “from Assam Guwahati?” বুলিকৈ মোক স্তম্ভিত লাইভ ছাৰ্জাৰী চাবলৈ কোৱা হ’ল। কালিৰ পৰা মোৰ Training ECCE ৰে আৰম্ভ হ’ব।

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ইয়াত ভাষাক লৈ বৰ অসুবিধা। সাধাৰণ মানুহে তামিলৰ বাহিৰে হিন্দী, ইংৰাজী একো বুজি নাপায়। অহাৰ পৰাই মই ফুড এলাৰ্জিত ভুগী আছো। ডায়েৰিয়া হৈ আছে। মেচৰ ৰান্ধনী জনক মই যোৱা ১০ দিন ধৰি বুজাই আছে যে মই সিদ্ধ বগা ভাত আৰু জ্বলা-টেঙা নিদিয়া দাইল খাব বিচাৰো। হিন্দী, ইংৰাজী সি একো বুজি নাপায়, আকাৰে ইংগিতৰেও বুজাই আছে। বহুদিনৰ মুৰত সি বুজি পালে wet rice / boiled rice মানে বগা ভাগ, সেইটো সি দিব পাৰিব। ৰক্ষা, অন্তত মই বগা ভাতকেইটা পাম, বাকীখিনি পিছত ঠিক কৰি ল’ব লাগিব। গধূলি এজনী তামিল ডাক্তৰণী মাতি আনি মোৰ খাদ্যৰ সমস্যাটোৰ কথা কলো। মোৰ সমস্যাটোৰ কথা তাই ৰান্ধনী জনক ভালকৈ বুজাই কলে। সি হাঁহি হাঁহি ক’লে— কাইলৈৰ পৰা সি ভাত আলুসিদ্ধ দিব পাৰিব, কিন্তু সি মোৰ ফৰমাইছ মতে দাইল বনাই দিব নোৱাৰে বুলি খাটংকৈ কৈ দিলে। মই যেন সৰগ ঢুকি পালো। মই অসমীয়াতে ভোৰভোৰালো— “হ’ব দে, নাই

মোমাইতকৈ কনা মোমাই....। এদিন ‘Wet lab’ত প্ৰেক্ষিত কৰি আছো। Wet labত আজি dutyত আছে OT Sister Manny। তাইৰ লগতে ভঙা ভঙা ইংৰাজীত কথা পাতি আছো। তাইৰ নামৰ উপাধিটো একেবাৰে মনত নাথাকে, বৰ জটিল। মই sister Manny বুলিয়ে মাতো। প্ৰায়বোৰ চিষ্টাৰৰ ভিতৰত তাইয়েই মোৰ বেছি ওচৰ ছপা। তাই মোক অসমৰ কথা সোধে, অসমৰ dress code কি? কিহৰ বাবে বিখ্যাত, Prime festival ইত্যাদি। কিছু ঘৰুৱা কথাও পাতে। তাই হিন্দী একেবাৰে নেজানে, ইংৰাজী অলপ ক’ব পাৰে। কথাবোৰ বুজাওতে কিছু কষ্ট আৰু দীঘলীয়া হৈছিল। আমাৰ কথাবোৰ শুনি ওচৰতে থকা (Phoco Trainee) নাইজেৰিয়াৰ ডাঃ ব্ৰিগিদ ইৰিকিতোলাই (Dr. Brigid Erikotola) মোক সুধিলে— “You are both Indian, do not you have a common language for communication?” মই কলো দক্ষিণ ভাৰতত হিন্দী নচলে, ইংৰাজীও সাধাৰণ মানুহে ভালদেৰে বুজি নাপায়। তামিল, এদিনতে শিকা ভাষা নহয়। সেয়ে problem। তাই ক’লে— সিহঁতৰো বহুতো ভাষা থাকিলেও মেট্ৰো চহৰ বোৰত Common languageৰ অভাব নহয়।

চিষ্টাৰ ‘মান্নি’ৰ ঘৰ তিৰুনেলভেলিত। মাক, দেউতাক আৰু এজন সৰু বায়েক আছে। চিষ্টাৰ মান্নি বৰ কথকী, ইংৰাজীতে হোৱাই নোহোৱাই কিবা-কিবি কৈ থাকে। মই বুজি নাপালে হাঁহে। OT প্ৰায় তাইক লগ পাও। তাই ধেমালিতে ক’লে— “You must remember my full name with title, will ask you tomorrow at O.T., Ok?” মই ক’লো— “Ok, but, I can't remeber your last name, it's very complex to spell.” তাই আকৌ হাঁহিলে।

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আজি ৰবিবাৰ। হস্পিটাৰ duty নাই। পূৱা ৮.৩০ বজাত শুই উঠি ভাবি আছো দিনটো কি কৰো। ৰুমত সোমাই থাকি ব’ব হৈছে। গা-পা ধুই জলপান কৰি কইস্বাটুৰতে থকা বিখ্যাত হিন্দু মন্দিৰ ‘মাৰুথামালাই’ (Maruthamalai Hindu Temple) চাবলৈ বুলি ওলাই যাও। টেম্পো এখন ভাড়া কৰো, ড্ৰাইভাৰজন অলপ বয়সীয়াল, ব্যৱহাৰপাতি ভাল।

অহা-যোৱা ৮০০.০০ টকাত বন্দৰস্ত হ'ল। বিমান বন্দৰৰ পৰা মাৰুথামালাই মন্দিৰলৈ ২২ কিঃমিঃ দূৰত্ব। ৫০ মিনিটমান সময় লাগে। প্ৰথমে গান্ধীপুৰম হৈ Agricultural University, তাৰ পিছত Bharathiyar University Campusৰ মাজেৰে পাৰ হৈ মাৰুথামালাই মন্দিৰৰ প্ৰবেশ দ্বাৰত গাড়ী ৰখাই মোক ড্ৰাইভাৰজনে ক'লে যে ইয়াৰ পৰা আপুনি খটখটীৰে ১৫ মিনিটৰ বাট ওপৰলৈ গৈ মন্দিৰ দৰ্শন কৰিব পাৰে, নতুবা কাষত থকা কাউন্টাৰৰ পৰা টিকট লৈ বাছেৰ গৈ মন্দিৰ দৰ্শন কৰিব পাৰে। মাৰুথামালাই মন্দিৰটো এখন প্ৰকাণ্ড হাবি-বননীৰে ভৰা সেউজীয়া পাহাৰেৰ এটলিয়াত অৱস্থিত। মই বাছৰ বাবে টিকট ল'বলৈ দৰ্শনাৰ্থীৰ শাৰীত ঠিয় হলো। দহ টকাৰ টিকট কিনিব লাগে। গেটৰ পৰা প্ৰতি দহমিনিট মানৰ মুৰে মুৰে মন্দিৰৰ পৰা বাছ আহি দৰ্শনাৰ্থীক লৈ যায় আৰু উভতি অহা সকলকো নমাই দিয়ে। ৰবিবাৰ বাবে আজি দৰ্শনাৰ্থীৰ বহুত ভিৰ। বাছেৰে গৈ ১২-১৫ বজাত মন্দিৰ প্ৰাঙ্গন পালো। যাত্ৰাটো ঠিক আমাৰ কামাখ্যা মন্দিৰলৈ যোৱাৰ দৰে এটা সুন্দৰ পাহাৰীয়া পকী ৰাস্তা। অৱশ্যে কামাখ্যাৰ নিচিনা ইমান ওখত নহয়, ৰাস্তাটো অলপ ঠেক। মন্দিৰৰ ওপৰৰ পৰা তললৈ চালে তলৰ চহৰখন গুৱাহাটীৰ নিচিনাই লাগে। বহুত মিল আছে। জোতায়োৰ নিৰ্দিষ্ট কাউন্টাৰত জমা থৈ (Free service) টিকট ললো আৰু খটখটীৰে ওপৰলৈ উঠিলো। ভালেমান উঠিব লাগে মূল মন্দিৰৰ প্ৰাৰ্থনা গৃহলৈ। দৰ্শনাৰ্থীৰ প্ৰচণ্ড ভিৰ, বহুদীঘলীয়া শাৰী। বহুবোৰ প্ৰাৰ্থনা স্থলী আৰু গৃহ, সকলোতে শাৰীপাতি দৰ্শন কৰিব লাগে। সময় মোৰ হাতত কম বাবে সকলোতে ভিতৰত প্ৰবেশ কৰা সম্ভৱ নহ'ল। বাহিৰে বাহিৰে গোটেইখিনি চালো। প্ৰাকৃতিক পৰিৱেশ বৰ সুন্দৰ। তাত অনাৱশ্যকীয় কোনো কৃত্ৰিম Construction, হোটেল, বিল্ডিং বনাবলৈ দিয়া নহয়, ভোজনঘৰ আৰু যাত্ৰীজিৰণি চৰাৰ বাহিৰে। কামাখ্যাৰ নিচিনা ইয়াত জনবসতিপূৰ্ণ চহৰ নাই। গছ-গছনি যথেষ্ট সুন্দৰ প্ৰাকৃতিক ভাৰসাম্য। গাড়ী-মটৰ থোৱাৰ বৃহৎ পাৰ্কিং ঠাই আছে, যথেষ্ট আহল-বহল। মন্দিৰৰ কিছুমান ছবি ললো। মন্দিৰবোৰৰ মূল গৃহৰ স্থপত্যৰ আৰ্হি তাৰ প্ৰভাৱ একেবাৰে কম। কাৰুকাৰ্য্য বিলাক ড্ৰাইভীয়ান সভ্যতাৰ, মূল মন্দিৰৰ খুটাবোৰ, প্ৰকাণ্ড চূড়াৰ মূল প্ৰবেশদ্বাৰটো অপূৰ্ব চিত্ৰ-ভাস্কৰ্য্যৰে খোদিত।

চৌহদৰ ওচৰতে কৰবাত লিখা আছে এনেদৰে— “Belong to 12th century the temple is surrounded by the hilly area, considered as the seven house of Lord Murugan the Presiding deity of south. The temple is classified under 'Kunruthoradal', as one of the six main abodes of the God. The origin of the temple date back to age of 'Surapadama', the demon destroyed by 'Lord Subramanya'. There is a 'Idumba Shrine' here, which house an image of the deity carved on a huge rock. Couple often come here to offer toys and cradles. It is believed that who donate here are blessed with a progeny. It is beautiful to come here at the time of the "Lord Murugan' and 'Thaipusam' festival, when the temple is at its most vibrant.”

কিছুসময় চাই, ঘূৰি পাকি ১.৪০ মান বজাত পাহাৰৰ ওপৰৰ পৰা তললৈ নামি আহিলো। জোতায়োৰ কাউন্টাৰৰ পৰা লৈ পাৰ্কিংৰ কাষে কাষে থকা দোকানবোৰ চালো। ডাব-নাৰিকলৰ পানী খালো, গৰম লাগিছিল। কিতাপৰ দোকানবোৰ চালো, মন্দিৰৰ ইতিহাস, ভাস্কৰ্য্যৰ বিষয়ে কিতাপ পাও নেকি চালো, আছে, কিন্তু সকলো তামিল, তেলেগু আদিত লিখা, ইংৰাজী বা হিন্দীত একো কিতাপ নাই। দুইমান বজাত পাহাৰৰ ওপৰৰ পৰা তললৈ নামি যোৱা খটখটীৰে নামি আহিলো। কামাখ্যাৰ মেখেলা উজুওৱা বাটৰ দৰে, মাথো এইটো যথেষ্ট আহল-বহল। মাজে মাজে সমতল জিৰণিচ'ৰা, সুন্দৰ ভাস্কৰ্য্যখোদিত তোৰণ বোৰ, মাজে মাজে ফলমূলৰ দোকান, দুই এজন ক্ষয়ৰোগ (Leprosy)ত আক্ৰান্ত ভিক্ষাৰী, দুই-এজন ভৱিষ্যত দ্ৰষ্টা হাত চোৱা পণ্ডিত। চাৰিওফালে মনজুৰুৱা সেউজীয়া পৰিৱেশ। নামি আহি থাকিলো, মাজে মাজে ৰাস্তাৰ কাষত প্ৰেমিক-প্ৰেমিকাৰ যুটি, নিজৰ মাজতে বিভোৰ। একেবাৰে তলৰ তেৰাণটোৰ কাষত মোলৈ ড্ৰাইভাৰজন ৰৈ আছে। ... Wow, you coming down by steps, great! ড্ৰাইভাৰজনে কলে। মই ক'লো অসমতো এনেকুৱা ধুনীয়া বহুত মন্দিৰ আছে। “I heard about Assam, but not visited yet.”— ড্ৰাইভাৰজনে ক'লে। তিনিমান বজাত হোটেল পালো।

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ট্ৰেইনিঙৰ আজি এমাহ সম্পূৰ্ণ হ'ল। আৰু এমাহ বাকী আছে। ডাঃ চাইনী পডমনৰ আজি শেষ দিন। তাই এমাহৰ বাবে আহিছে। মোৰ অপাৰেচনটো কৰি Dr. Jayanthy মেডামক লগ কৰো। মেডামে কলে যে, অহাকালি ৰাতিপুৱা ৭.৩০ বজাতে আজি কৰা case টো O.T. incharge (head) ডাঃ কল্পনা মেডামক (Dr. Kalpana Narendran) দেখুৱাব লাগিব। (Unit-I consulting room)। মোৰ আজিৰ ৰোগীজন হ'ল- "Nandan", ঘৰ কানুৰত (Kanur, Kerala)। অপাৰেচন ভাল হৈছে। O.T.ৰ শেষত Dr. Sini Padmanক লগ কৰি কথাপাতিলো। তাইৰ আজি শেষ দিন, কাইলৈ ঘৰলৈ যাবগৈ। ডাঃ নবনীথৰ SICS ট্ৰেইনিঙ শেষ, কাইলৈৰ পৰা Phaco ট্ৰেইনিং আৰম্ভ হ'ব। পিছদিনা (০১/১১/২০১৭) দ্বিতীয় মহলাত থকা Free hospital wardত ৰোগীজন বিচাৰি আনি Stit lampত পৰীক্ষা কৰিলো। ভাগ্যে অপাৰেচন ভালেই হৈছে, Corvea clear, Pupil round, IOC in bag। চিষ্টাৰ এজনী লগত লৈ ৰোগীজনৰ সৈতে ডাঃ কল্পনা মেডামৰ কমলৈ গ'লো (Unit-I)। মেডাম এতিয়াও আহি পোৱা নাই। ৰোগীজনৰ Refraction কৰি আন এজন চিনিয়ৰ চাৰ্জৰ হতুৱাই পৰীক্ষা কৰালো। তেখেতে ভালেই হোৱা বুলি কলে। Vision out came 6/9, Log Bookত তেখেতে good বুলি লিখি দিলে। তাৰ পিছত কল্পনা মেডামলৈ অপেক্ষা কৰি আছো। ভয়ো লাগিছে, কি বা কয়? অৱশেষত আহিল। মোলৈ চাই হাঁহিছে, সুখিলে ক'ব পৰা আহিছে। caseটো চাই ভালহৈছে বুলি কৈ log bookত good বুলি লিখি চহী কৰি দিলে। এইকামখিনি কৰি আকৌ O.T. লৈ আহিলো। আজিৰ পৰা আকৌ আমাৰ ফেকাল্টিবোৰ সলনি হৈছে। মোৰ ফেকাল্টি Dr. Jayanthy মেডামৰ ঠাইত Dr. Hridaya Mohan মেডামক দিছে। তেখেত বহুতে Priya Mam বুলি কয়। আজি অলপ ৰোগী কম, প্ৰায় ১৫০ জন মান হ'ব। দুই বজাত মই মোৰ অপাৰেচনটো কৰিলো। Pre-mature entry হ'ল, বাকী ভালেই হ'ল। প্ৰিয়া মেডামে সহায় কৰি দিলে। scleval woundত দুটা চিলাই মাৰি AC ভালকৈ maintain কৰিলো। IOL- in bag। হোষ্টেললৈ উভতি আহো। ৰাতি ৮.৩০

বজাত ভাত খাই Air portৰ ফালে ওলাই যাওঁ। ঠাণ্ডা অলপ পৰিছে, কিন্‌কিন্‌কৈ বৰষুণ দিয়া আৰম্ভ কৰিলে।

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তৃতীয় মহলাত Post. Op ৰোগীবোৰ থাকে। যোৱা কালি অপাৰেচন কৰা ৰোগীজনক পৰীক্ষা কৰো। ৰোগীজনৰ ট্ৰাম 'আনা' ঘৰ কৰ্ণাটকত। central PC rent এটা আছিল, মেডামে Ant. verectomy কৰি sclenal woundত চিলাইদিছিল। তথাপি caseটো ভালেই আছে। গা-পা ধুই খাবলৈ ওলাই যাও। এনেতে মাধুৰ্য্যই (Dr. Madhurjya Gogoi) ফোন কৰে। 'OSA'ৰ স্মৃতিগ্ৰন্থখনৰ (Golden Jubilee) বাবে কবিতা এটা লিখি দিবলৈ কলে অতি সোনকালে। মই হ'ব বুলি কৈ আবেলি চাহখাবলৈ Airportৰ ফালে ওলাই যাও। অফিচিয়েল কলনিৰ মাজেদি গৈ একেবাৰে Runwayৰ ওচৰ পঁাও গৈ। সেইফালে মানুহ-দুহু নাই, কেবল মুকলি পথাৰ। কুকুৰ কিছুমানে যেনি-তেনি ঘূৰি ফুৰিছে। ৰাতি ৮-৩০ বজাত আহাৰ খাই logbook লিখো।

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ডাঃ হৃদয়া মেডামক লগ কৰো। আজিৰ মোৰ ৰোগীজনী এজনী ৭০ বছৰীয়া মহিলা। নাম 'চুব্বাথাল' (Subbathal)। ভালকৈ Rhexis কৰিব পৰা হৈছে। ১২ বজাত লাঙ্গ কৰি Wet lab লৈ যাও। দুই বজাত হোষ্টেললৈ ঘূৰি আহো। বতৰ ডাৰৰীয়া। ডাঃ নবনীথক লগ পাও। আজি সি ঘৰলৈ যাবগৈ। ৰাতি ডিনাৰ টেবুলত লগ হ'ম বুলি কৈ সি O.T. লৈ গুচি গ'ল।

ট্ৰেইনিঙ বিভাগৰ Co-ordinatorক লগ কৰ মোৰ Progress Report ৰ বিষয়ে জনাও।— "Tomorrow is my last day of training. I have already completed 44 cases of surgeries, with nice improvement in surgical skills, hearing lots of experience, friendly and good academic environment here in AEH, Coimbatore." মই Co-ordinatorক কলো। She smiled and assured to complete the all necessary official works and formalities including issuing certificate tomorrow in time. I also told her that I

will visit Kochi, Kerela, as I have two days in hand for departure.

ডাঃ নৰনীথক ডাইনিঙ টেবুলত লগ পাও। একেলগে দুয়ো খাবলৈ বহো। খোৱাৰ আগতে মই তাক মোৰ ক্ৰমলৈ আহিবলৈ কও। আজি ৰাতি ৯ বজাত Flight আছে হাইদৰাবাদলৈ। কিছুসময় দুয়ো কথা পাতো, কিছু অন্তৰংগ চেল্ফি। বিদায়ৰ সময়ত বৰ বেয়া লাগিছে। খা-খবৰ লৈ থকাৰ প্ৰতিশ্ৰুতিৰে নৰনীথ গ'ল গৈ। হঠাতে ডাঃ হৃদয়া মোনহ মেডামৰ পৰা এটা মেছেজ পালো। কালি পুৱা ৭ বজাতে মোক অপাৰেচন কক্ষলৈ মাতিছে। মোৰ প্ৰশিক্ষণৰ শেষ অপাৰেচনটো কৰিবলৈ। ৰাতি সোনকালে শুই থাকিলো।

৩০/১১/১৭

যোৱাকালি কৰা অপাৰেচনৰ ৰোগজীন পৰীক্ষা কৰিবলৈ Day Care OPDলৈ গলো। slit lampত চালো। অলপ SK⁽¹⁾ আছে, লগতে redidual cortex। মোৰ প্ৰথম শিক্ষক ডাঃ জয়াস্বী মেডামক লগ কৰিলো। তেখেতে কলে যে একো নহয়, ৭ দিন পিছত Cortex wash কৰি দিলে হ'ল। tb diamox 250mg Hypersol 5% দি ৭ দিন পিছত ৰোগীজনক মাতি দিয়া হ'ল। মেডামৰ পৰা বিদায় লৈ হোষ্টেললৈ আহিলো।

ট্ৰেইনিং শেষ। ভালো লাগিছে, এফালে বেয়াও লাগিছে। হাতত আৰু দুদিন সময় আছে। অক্টোবৰ দুই তাৰিখে ৰাতি ফ্লাইইট আছে গুৱাহাটীলৈ। গতিকে ভবামতে আহি কোচি (Cochi)লৈ যোৱাটোকে ঠিক কৰিলো। গা-পা ধুই সাজু হৈ ওলালো। ইয়াত কোচিলৈ বাছ পোৱা নাযায়, প্ৰথমে গান্ধীপুৰম বাছ ষ্টেণ্ডলৈ যাব লাগিব। Evening Service কম, night Serviceহে বেছি। Cab এখন লৈ গান্ধীপুৰামলৈ গ'লো। কেব ড্ৰাইভাৰজন বৰ কথা চহকী, অনৰ্গল বকি থাকে। নাম চি. চেলভম। নামৰ অৰ্থ হ'ল 'earing money', নিজে নিজে কৈ নিজে নিজে হাঁহিলে। তেওঁ পৰম আত্মা (Amma) ভক্ত (Amma-Jayalalita)। তেওঁ ক'লে যে আত্মাক হত্যা কৰা হৈছে, it was not a natural death! গান্ধীপুৰাম গৈ দেখিলো চৰকাৰী বাছ নাই এতিয়া, কেব ড্ৰাইভাৰজনে ট্ৰেভেল এজেণ্টি (Rasa Travels) এটালৈ

লৈ গ'ল। Suppar Travelৰ এটা টিকত ললো, মূল্য ৫০০ টকা। আচলতে মূল্য ৩৮০ টকা, বাকিখিনি এজেণ্টিৰ লাভ। আবেলি ৫.১৫ বজাত গাড়ী এৰিব কোঁচি লৈ। মোৰ পৰা বিদায় লৈ কেব ড্ৰাইভাৰজন গ'লগৈ। মোৰ ফোন নংটো লৈ গ'ল। মাজে মাজে ফোন কৰিব হেনো। ৫.২০ বজাত যাত্ৰা আৰম্ভ হ'ল। ঘৰলৈ ফোন কৰি কথাটো জনালো। পল্লাকাদ (Pallakad) হৈ (Avinushi Road) কোঁচি লৈ যাত্ৰা আৰম্ভ হ'ল। কোঁচি পাওঁতে প্ৰায় ৫ ঘণ্টা সময় লাগিল। কণ্ডাক্টৰক কলো last stoppageত নমাই দিবলৈ। মাটনছেৰী (Mattancherry) হ'ল বাছখনৰ last stoppage। কোঁচিলৈ মই এই প্ৰথম আহিছো, গতিকে ইয়াৰ ঠাইবিষয়ে একো নাজানো। মাটনছেৰী পাওঁতে নিশা প্ৰায় দহ বাজিছিল। সৰু হোটেল এখনত নামি সুধিলো, ওচৰত থাকিবৰ বাবে হোটেলৰ বিষয়ে। মোৰ এই ভ্ৰমণ আছিল সম্পূৰ্ণ আকস্মিক। কোনো পূৰ্ব পৰিকল্পনা নাই। মই হোটেলখনৰ মালিকজনক ক'লো—“I am coming from Assam, presently at Coimbatore” হোটেলৰ বয়সীয়া মালিকজনে ইংৰাজীতে মোৰ লগত কথা পাতিলে। সুন্দৰ ইংৰাজী জানে। তেওঁ ক'লে—“From here, you should go 2k.m. ahead, find a Junction, and nearby you will find two hotels. One is very costly and other is cheap, called 'Abad Hotel'” মই কোৱামতে অটো এখনলৈ 'Abad Hotel' লৈ গ'লো। মানুহজনে বহুত হেল্প কৰি দিলে। হোটেলখন ভাল, বৰ সস্তাও নহয়। প্ৰতি বাৰ ঘণ্টাত ২২১০/= টকা। ৰাতিপুৱাৰ জলপান ফ্ৰি। মোক ১০৪ নং কোঠালৈ লৈ গ'ল। মুখ-হাত ধুই খানাৰ অৰ্ডাৰ দিলো। নিৰামিষ আহাৰৰ মূল্য ৩৯৮/= টকা। ভালে ভালে কোঁচি আহি পাইছো বুলি ঘৰলৈ ফোন কৰি জনালো। খানা খাই সোনকালে শুই থাকিলো। পুৱা যিমান পাৰি কোঁচি খন চাই আবেলি কাইস্বাতুৰ লৈ ঘূৰি যাব লাগিব।

১/১২/২০১৭, শুক্ৰবাৰ

পুৱা ৮ বজাত উঠি মুখ-হাত ধুই জলপান খাবলৈ তলৰ ডাইনিং হললৈ যাও। হোটেলখন খুৱেই পৰিস্কাৰ। টুৰিষ্টবোৰে breakfast কৰি ইতিমধ্যে দিনটোলৈ ওলাই যাবলৈ সাজু হৈছে। সন্মুখৰ পথটো বিৰাট ব্যস্ত। যাত্ৰীবাহী

বাছবোৰ খোলাখিৰিকিৰে পৰ্দা লগোৱা। অটো, কেব বহুত চলে। ঠাইটুকুৰাত অলপ মুছমিল সম্প্ৰদায়ৰ মানুহ বেছি, অলপ আগলৈকে গীৰ্জা আছে, ওচৰতে ধুনীয়া মছজিদ এটা। গা-পা ধুই বস্ত্ৰ-বাহিনী মোনাত ভৰাই তললৈ আহিলো। একেলগে Cheek-out কৰি (১১ বজাত) ফুৰিবলৈ ওলাই যাম। তাৰ পৰা আহি বাহিৰে বাহিৰে কইস্বাতুৰ লৈ বাছত উঠিম গৈ।

হোটেল মেনেজাৰক site seeing (local tour)ৰ কথা কলো। তেখেতে কলে যে অটো এখন ভাড়া কৰি দুঘণ্টা মানতে প্ৰায়খিনি ঠাই ঘূৰিব পাৰি। তেওঁ এখন local tourৰ leaflet (Cochin city tourist map & information) দিলে। হোটেলৰ কোঠাত দি যোৱা Indian Express (Kochi Edition) বাতৰি কাকত পঢ়িলো। মনটো বৰ বেয়া লাগি গ'ল। যোৱা কালিৰে পৰা কোঁচিৰ চুনামীৰ তাণ্ডৰ। সমগ্ৰ দক্ষিণ আৰৱীয় উপকূল, দক্ষিণ তামিল আৰু কেৰেলাৰ ওপৰেৰে লাক্ষাদ্বীপ হৈ “Ockhi cyclone” (অক্ষি ধুমুহা)এ তাণ্ডৰ চলাইছে, অশান্ত হৈ আছে সমগ্ৰ সাগৰীয় উপকূল। সন্ধাহীন বহু মাছমৰীয়া জাহাজ। ৰেড এলাৰ্ট জাৰি কৰা হৈছে কেৰেলা প্ৰশাসনৰ দ্বাৰা। এতিয়াও কিন্ন কিন্তৈ বৰষুণ দি আছে। বৰ আশাৰে আহিছিলো নীলা সাগৰ চাবলৈ, সাগৰৰ বীচত উপভোগ কৰিম। এতিয়া সকলো বিধবস্ত বীচৰ নাম গোন্ধেই নাই, ঘোলা পানী আৰ্জনাৰে কদৰ্য্যময় সাগৰৰ উপকূল। টুৰিষ্টা'ৰ বাবে বিচৰ উপকূল Coast guard পুলিচে বন্ধ কৰি দিছে। ছিঃ কি যে কপাল! কোঁচিৰ অন্য এটা বিধবস্ত ৰূপহে আজি চাবলৈ আহিলো। মনতে ভাবিলো ‘কোঁচি’ৰ এয়াও এটা ৰূপ, ইয়াৰো বহুত সৌন্দৰ্য্য আছে, বিশেষ ধৰণৰ! বহুতে হয়টো এই সাগৰৰ উগ্ৰমূৰ্ত্তি ৰূপ-সৌন্দৰ্য্য উপভোগ কৰিবলৈ সুযোগ নাপায়। হয়টো It is my luck to enjoy the beauty of anger of a great ocean! গতিকে হতাশ হোৱাৰ কোনো কাৰণ নাই। অটো এখন লৈ ওলাই গলো। কেব ড্ৰাইভাৰ জনৰ নাম মঃ ৰিয়াজ, খুব ভাল ল'ৰা, অমায়িক, ভদ্ৰ ব্যৱহাৰ। হিন্দী ভালকৈ নাজানে, অলপ ইংৰাজী ক'ব পাৰে। তাৰ ডাঙৰ ভায়েক জন বিদেশী পৰ্য্যটকৰ দল এটাৰ লগত ব্যস্ত আছে। প্ৰথমতে ‘Fort Kochi’ লৈ গলো। তাত এটা এটাকৈ Vascoda-Gama Square, Dutch Cemetery Parade Ground,

Santacruz Basilica, St. Francis Church, Chinese fishing Nets আদি চালো। তাৰ পিছত ‘মাটনছেৰী’ আহিলো। মাটনছেৰীও Dutch Palace, Jew Cemetery, Jewish Synagogue আদি চালো। ইয়াত ফটো তোলা সম্পূৰ্ণ নিষেধ, মাথো চাহাবে পাৰিব। বীচবোৰ ঘোলা পানী, আৰ্জনাৰে ভৰ্ত্তি, গৰ্জনমুখৰ সাগৰ, ভয়লগা দৃশ্য, টুৰিষ্টৰ বাবে বীচ বন্ধ কৰি দিয়া আছে, coast guard সস্তম হৈ আছে। দুৰৰ পৰা ভয়ে ভয়ে চালো সাগৰখন। মই ভাবি অহা তৰংগায়িত নীলা সাগৰখনি নাই! মাছমৰীয়া জাহাজবোৰ দূৰলৈ যোৱা নাই, উপকূলৰ সৰু নাওবোৰ বিশৃংখল হৈ পাৰি আছে, ‘Fish-Market’ খন প্ৰায় খালি। মাটনছেৰীৰ উপকূলীয়া বজাৰ ধুমুহাই লেতেৰা কৰি থৈছে। তথাপি ঘূৰিলো, কোঁচিৰ সুন্দৰতা অনুমান কৰিলো। ভাৰতৰ বহু পুৰণি বন্দৰ চহৰ বাবে কোঁচিলৈ বহুবিদেশী পৰ্য্যটকৰ আগমন ঘটে। বন্দৰ বাবে বহুবিদেশীৰ পূৰ্বপুৰুষৰ জীৱন, ব্যৱসায়, বাণিজ্য বা অন্যধৰণে আত্মিকভাবে জড়িত হৈ আছে কোঁচিৰ সৈতে। বিশেষকৈ জিউচসকল, ডাচসকল। এতিয়াও বিদেশৰ বহু জিউচ (Jewish)ৰ নতুন প্ৰজন্মৰ বাবে কোঁচি পৰিত্ৰ ঠাই। ভাৰতত থাকি যোৱা জিউচসকলৰ জীৱন, শিল্পকৰ্ম, স্থপতিবোৰ সংৰক্ষণ কৰি ৰাখিবলৈ গঠন কৰা হৈছে “World Monuments Fund- Jewish Heritage Programme (WMF)” কোঁচিত থকা ‘Paradise synagogue’ চালো, এইটো বনোৱা হৈছিল ১৫৬৮ চনত, স্পেনিচ ডাচ (Dutch) আৰু ইউৰোপীয়ান জিউচৰ পূৰ্বপুৰুষ সকলে। জিউচ সকলৰ ‘Clock Tower’ চালো। পিছত এই ‘Clock Tower’ ১৭৬০ চনত নতুনকৈ সংযোজন কৰা হৈছিল। কোঁচিৰ বহু গান্ধীৰ্য্যপূৰ্ণ ঐতিহ্য আছে, দেশৰ লগতে বহু বিদেশী শসক্তিশালী জাতিৰ সংমিশ্ৰণত গঢ় লৈ উঠিছিল এক আন্তৰ্জাতিক শিপকলা, স্থপতিৰ এক অপূৰ্ব সমাহাৰ। চহৰখন ঘূৰিলেই আন্তৰ্জাতিক বুৰঞ্জীৰ পৰশ, শিল্পকলাৰ গোন্ধ পোৱা যায়, কোঁচিৰ ই এক অপূৰ্ব একক flavour বা বৈশিষ্ট। বৰ ব্যস্ত চহৰ নহয়, এখন শান্ত চহৰ, লগতে আছে এৰাই চৰিব নোৱাৰা এক গান্ধীৰ্য্য, সন্মান!

কেব ড্ৰাইভাৰ ৰিয়াজে ক'লে যে প্ৰতিকূল বতৰৰ বাবে এইকেইদিন পৰ্য্যটকৰ বাবে ভালদিন নহয়। “Village back water Cruise in Non-Mechonised shikkara

Boat” আদিও বন্ধ কৰি দিছে ধুমুহাৰ বাবে। আজিলৈ এইখিনিয়ে। মই কলো তেনেহ’লে এতিয়া Abad Hotelলৈ যোৱাই ভাল হ’ব। যোৱাৰ আগতে কিবা এটা খাই ল’ব লাগিব। ৰিয়াজে এখন ভাল স্থানীয় আহাৰ পোৱা হোটেলৰ ব্যৱস্থা কৰি দিলে। সি মোক হোটেলত থৈ তাৰ স্কুলত থকা ল’ৰাটো আনিবলৈ গ’ল। ফোন নম্বৰটো দি গ’ল। সাগৰীয়া মাছৰ জোলেৰে স্থানীয় আহাৰ এসাজ খালো। ভাল লাগিল।

পুনৰ হোটেল আবাদলৈ আহিলো। মোৰ বেগটো লৈ পুনৰ ৰিয়াজৰ কেবতে উঠি আৰ্নাকুলাম লৈ গলো। মাটনছেৰীৰ পৰা আৰ্নাকুলামলৈ প্ৰায় ১২ কিঃমিঃ মান হ’ব। মাজত থকা উইলিংডন দ্বীপ (Willingdon Island) পাৰ হৈ যাব লাগে। ইয়াত দুখন ব্ৰীজ আছে। Old Thoppampady and new Thoppampady। তাৰপিছত ‘Cochin Shipyard’ৰ কাষেৰে গৈ আৰ্নাকুলাম। কোঁচিন বহুকেইটা দ্বীপৰ সমষ্টি। Vypin Island, Vallarpadam Island, Bolgatty Island, Willingdan Island আদি। প্ৰথমে আৰ্নাকুলামৰ ‘KSRTC’ বাছ ষ্টেচনলৈ গলো। কিন্তু

তাত ৫.৩০ বজাতহে বাছ আছে কইস্বাতুৰলৈ। এতিয়া দিনৰ ২ বাজিছে, ইমান সময় কি কৰা যায়। Private বাছ চাবলৈ কলো ৰিজায়ক। ৰিয়াজে বহু কষ্ট কৰি সুধি-পুছি প্ৰায় আধাঘণ্টামানৰ মুৰত প্ৰাইভেট বাছ এখন পালে। ইয়াত প্ৰাইভেট বাছতকৈ চৰকাৰী বাছহে বেছি চলে। তাৰোপৰি প্ৰাইভেটবোৰ online booking হৈ থাকে। মই অনলাইন টিকেট লোৱা নাছিলো। ‘Suppa Travels’ত ছিট এটা পালো। ৰিয়াজ ল’ৰাজন খুবাই helpful। বহুকষ্ট কৰি মোক কইস্বাতুৰলৈ পঠিয়াই এৰিলে। সি পইচা-পাতি দাবী কৰাটো দুৰৰ কথা, নিজৰ পাবলগা ভাড়াটোকে খুজিবলৈ লাজ কৰে। এনে ড্ৰাইভাৰ মই প্ৰথম পালো। মই তাক পাবলগাতকৈ অলপ বেছিকৈয়ে পইচা দিলো। তাক ধন্যবাদ জনাই বিদায় লৈ বাছত উঠিলো কইস্বাতুৰলৈ বুলি। আকৌ বৰষুণ দিবলৈ আৰম্ভ কৰিলে। সাগৰীয়া ধুমুহা শেষ হোৱা নাই।

নিশা ৮.৩০ বজাত কইস্বাতুৰ পালোহি। অট এখন লৈ হোটেললৈ আহিলো। ভাগৰ লাগিছিল। আহাৰ খাই সোনকালে শুই থাকিলো। কাইলৈ গুৱাহাটীলৈ যাম গৈ।





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Basics of Share (Stock) Market

Dr Nilutpal Sarma

The share market is a platform where buyers and sellers come together to trade on publicly listed shares during specific hours of the day. People often use the terms ‘share market’ and ‘stock market’ interchangeably. However, the key difference between the two lies in the fact that while the former is used to trade only shares, the latter allows you to trade various financial securities such as bonds, derivatives, forex etc. The principal stock exchanges in India are the National Stock Exchange (NSE) and the Bombay Stock Exchange (BSE).

Types of Share Markets

Stock markets can be further classified into two parts: primary markets and secondary markets.

- Primary Share Markets-When a company registers itself for the first time at the stock exchange to raise funds through shares, it enters the primary market. This is called an Initial Public Offering (IPO), after which the company becomes publicly registered and its shares can be traded within market participants.
- Secondary Market-Once a company’s new securities have been sold in the primary market, they are then traded on the secondary stock market. Here, investors get the opportunity to buy and sell the shares among themselves at the prevailing market prices. Typically investors conduct these transactions through a broker or other such intermediary who can facilitate this process.

What Is Traded On The Share Market?

There are four categories of financial instruments that are traded on the stock exchange. These include:

1. Shares-A share represents a unit of equity ownership in a company. Shareholders are entitled to any profits that the company may earn in the form of dividends. They are also the bearers of any losses that the company may face.
2. Bonds-To undertake long term and profitable projects, a company requires substantial capital. One way to raise capital is to issue bonds to the public. These bonds represent a “loan” taken by the company. The bondholders become the creditors of the company and receive timely interest payments in the form of coupons. From the perspective of the bondholders, these bonds act as fixed income instruments, where they receive interest on their investment as well as their invested amount at the end of the prescribed period.
3. Mutual Funds-Mutual funds are professionally managed funds that pool the money of numerous investors and invest the collective capital into various financial securities. You can find mutual funds for a variety of financial instruments like equity, debt, or hybrid funds, to name a few.
4. Derivatives-A derivative is a security that derives its value from an underlying security. This can have a wide variety such

Souvenir, OSACON 2022

as shares, bonds, currency, commodities and more! The buyers and sellers of derivatives have opposing expectations of the price of an asset, and hence, enter into a “betting contract” with regards to its future price.

5. A stock exchange is an organized market, where traders can buy and sell the shares of different companies.
6. Investors and traders connect to the exchanges via their brokers, and place buy or sell orders on these exchanges.

7. A set of 50 stocks in the NSE (and 30 in the BSE) have been selected, on the basis of their company’s reputation, market capitalization, and significance, to be part of a weighted formula that gives us the ‘value’ of the index.

Conclusion Today, investing in stocks can be considered as one of the best ways to generate long term wealth. With a strategic investment plan, any investor can achieve their long term financial goals with the help of the stock market.

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Walking and Fitness

Jnanankar Medhi

Walking is the simplest and easiest way to start one's journey into fitness or to maintain fitness if one is already into it. It is a great way to improve or maintain your overall health. Just 30 minutes every day can increase cardiovascular fitness, strengthen bones, reduce excess body fat, and boost muscle power and endurance.

For a beginner, one might start with ten minutes a day in the first week, and then can increase the time by five minutes each week until you reach at least 30 minutes. For even more health benefits, one should aim for at least 60 minutes of physical activity most days of the week

A common question often asked is how long of a walk is a good workout? Or what is a good distance to walk every day?

Walking is a form of low impact, moderate intensity exercise that has a range of health benefits and few risks. So for most adults, recommendation is for 10,000 steps per day and this is the equivalent of about 8 kilometers, or 5 miles

Walking is a type of cardiovascular physical activity, which increases the heart rate. This improves blood flow and can lower blood pressure. It helps to boost energy levels by releasing certain hormones like endorphins and delivering oxygen throughout the body.

How fast should one walk to make it a cardio activity? According to the CDC, a "brisk walking" pace for most people is 3 miles or 5 kilometers per hour, or about 20 minutes per mile and 12 minutes per kilometer. Walking faster than 4 miles per hour (under 15 minutes per mile) is considered a fast pace — and is definitely cardio.

Fitting in the walking activity in one's busy schedule is another issue for most of us. We should walk



whenever we can schedule time or it. That brings us to the question of is it better to walk at night or in the morning? Studies found evening exercise could reduce feelings of hunger — helping your body prepare to rest and recover overnight. While the morning walk energizes one for the day, an evening walk actually does the opposite; helping the body naturally lower cortisol levels and feel less stressed.

Can one get fit just by walking?

Walking is simple, free and one of the easiest ways to get more active, lose weight and become healthier. Sometimes overlooked as a form of exercise, there is no doubt that walking briskly regularly can help build stamina, burn excess calories, make the heart healthier and promote overall health. And it can be done by almost everyone.

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Aesthetics and Cosmetology

Dr. Amarendra Deka. MS. FACS

FACE(Facial Aesthetic Centre)

Trinetra Nethralaya, Guwahati-35.Assam

Aesthetic medicine is a developing clinical specialty which uses minimally invasive medical procedures to enhance patients' physical appearance. Aesthetic medicine treatments have similar goals to plastic surgery procedures, but the big difference is that there is no cutting and stitches involved. This means, these procedures are much lower cost, carry much lower risk and there is no downtime after the procedure for the patient. That makes these procedures extremely popular.

Aesthetic medicine is the fastest growing branch of modern healthcare. This is a 40,000-crore industry, which is growing at close to 10% yearly. With around 91% female patients, the industry is dominated by women. But the growth rate of male clients is much higher, and they are expected to catch up. An estimate says that by 2040, the ratio of male : female clients may reach 35% : 65%.

Aesthetic medicine procedures started making inroads in India in late 90s. These procedures involved very limited set of treatments like chemical peels, some small machine-based procedures and a very limited set of Laser based treatments. Over first decade of 21st century, these machine-based treatments started giving better results and became cheaper. Laser based treatments became an option for surgical procedures. Risks were much lower and so were the costs. Lot of people started getting attracted to these procedures. This decade also saw introduction of Botox and Fillers based aesthetic procedures. These procedures provided instant results although they were temporary in nature.

Botox and Fillers became very popular across the globe. Even today Botox and Fillers based procedures account for more than one third of all the aesthetic procedures performed worldwide.

In India the volume of these procedures far surpassed the volume of surgical procedures. No one wants to look old anymore. So, more and more people are getting attracted to these procedures.

Here are the list of top 5 Aesthetic Medicine treatments:



Permanent Hair Removal: Permanent hair has been the most popular aesthetic treatment in India for a long time. The idea of getting rid of unwanted hair on body permanently is very lucrative. No more fortnightly waxing sessions. In reality when we talk

about permanent hair removal, it means hair reduction and not removal. Even the best of the Laser machines can achieve up to 90% reduction only.

Botox and Fillers: The only aesthetic medicine procedures which can provide instant results. These procedures are used for anti-ageing procedures to take care of fine lines, wrinkles and depleting fat pads on the face. Globally they account for more than one third of all aesthetics procedures performed. Their acceptance has been rising in India and so is their popularity. They are expected to become the most popular aesthetic treatment in India in coming years.

Semi-Permanent Makeup: The demand of perfect eyebrows, eye lashes and lips are soaring day by day. These procedures involve medical tattooing using specialized techniques called microblading and micropigmentation. Special pigments are used, which last anywhere between 9 months to 2 years depending on their quality.

Medicated Facial: Medicated facials or Medifacials, as they are popularly known, are special procedures using special products, which not only provide pampering (like normal facials do), but also combat skin issues like acne, pigmentation, acne scars, sun damage etc.

This gives a much better overall result to the patient. Lot of clients have started skipping normal facials and have started taking their super specialty Medifacials regularly. Even celebrities swear by and endorse Medifacials like Vampire facials, BB Glow and Oxygeneo.

Skin Lightening: Its one of the most controversial procedures in aesthetics today. Doctors are divided about the effectiveness as well as safety of IV Based Glutathione, which is used to provide lighter skin tone to clients. Despite that, this procedure is picking up

like a craze in all Asian countries including India where people dream about a fairer skin. The procedure involves injecting Glutathione using IV method. This is the only procedure available in the market which claims to provide full body skin lightening.

Now that we have looked at the past and the present, let us see what the future holds for these procedures in India. The popularity of these procedures is only going to increase with time. Some of procedures like Botox and Fillers will gain more acceptance in India. With rising life expectancy, more people would go for anti-ageing procedures in future. It is expected that the market for aesthetic medicine will grow at around 10-15% annually for next decade or so. Here is what is expected to happen:

Industry will move from a reactive (treating the symptom) procedure to wellness, where prevention is considered to be much better than treatment of symptoms. This means that people will start undergoing these procedures from an even younger age.

Quality of machines and products will improve over time, giving better results to clients with lower risk and almost zero downtime.

Procedures like skin lightening will continue to gain more popularity, despite all the controversies around it.

Procedures like Botox, Fillers, Skin Lightening and laser will gain popularity, while surgical procedures and invasive procedures (which need downtime afterwards) will continue to lose market share.

To conclude, Aesthetic Medicine is an exciting new field, which is growing at an astronomical pace. This will continue as more and more people will go for these treatments. All in all this is the field where everyone in healthcare including Ophthalmologists want to be today.

The life in the grand design...

Dipankar Das



The mystery of the Universe,
In the grand design,
Where we live,
To see nature's law,
For a new life...

The human instinct,
For the greater exploration,
In the quest of new ideas,
The challenge to tract down the new-life,
In much cosmic interference...

Imagining the neo-universe,
And its expansion,
Many floating apples will,
Rediscover the 'Grand Design'
With more life...

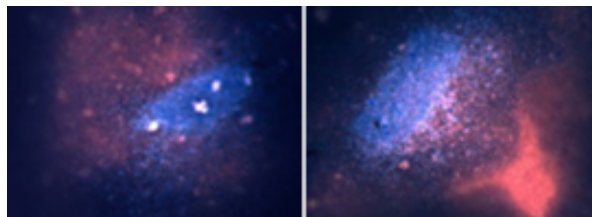
From conscious beginning,
We will set out the enterprise,

For the mankind and possible life
elsewhere,
In many cosmic interstellar homes...

Moving and moving beyond,
In our imagination sphere,
Life in the cosmos,
Will endeavour a 'New 'Earth'...

Will they be superior to us?
What are their looks and mind?
Those are our queries and many more-
Like a child's imagination....

If earth carries life for billion years,
The Grand Design will have some signs,
Of life and living!
And they will come to light....



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Textbooks to Tiara

A long journey....

Divya Borthakur Singh

It wasn't long ago I was a gawky teenager preparing for my high school examinations. To become a doctor was far fetched idea, but all the same, I appeared for my class 12 examinations and subsequently the joint entrance examinations.



I got through both with flying colours. Got admitted in AMC Dibrugarh with dreams in my eyes to become an eye specialist and serve the local people.

But never in my wildest dreams did I ever think I shall walk the ramp!

After I became an eye specialist it was a job here and there until I got into Central Hospital, Coal India- my present job.

The environs here is conducive to development- one's speciality and one's special interests- whether it be dancing, acting, singing or anchoring. I had anchored programmes in the official club since the day I joined, then followed dance dramas, dancing and well acting also.

But then participating in a beauty pageant did not remotely figure in my scheme of things. It was only when friends and acquaintances started encouraging, then I gave the idea a thought. Then came months of rigorous training, physically and mentally. To walk with poise and to talk meaningfully.

Beauty pageants aren't about only focusing on your looks.

It's about being healthy, active, articulate and in sync with the current affairs- to be able to make a change in the lives of people, less privileged.

Lastly I am thankful to all who accompanied me in this journey.

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Art and the Artist

Madona Bardoloi

Art is the expression of ideas and emotions through a physical medium like painting, sculpture, film, dance, writing, photography, theatre, etc. Artists use art as a vehicle to communicate ideas, thoughts, feelings and worldviews. All artists have something in common- their passion for their work.

Art is so diverse that there are different ways to understand it . So there are many definitions of the word. One such special definition penned by the famous Russian Novelist Leo Tolstoy is that “Art is the activity by which a person having experienced an emotion, intentionally transmits it to others”

Tolstoy was known to write based on his life experience. So the important point is that people look at art based on how they have experienced it.

Art gives meaning to our lives and helps us understand the world. It enables self-expression and self awareness, increases positive perspectives and provides means of contemplation and reflection. It allows us to explore our emotions and thoughts and to be open to new ideas and experiences. It is a source of entertainment. It gives us joy and adds beauty to our lives and ambience. The brain is very active when engaged in producing it. It can be financially rewarding too.

Art is an essential part of our culture and society. It is a record of past cultures and history. It is a universal language as it crosses language and cultural barriers making it a visual language which everyone can understand. It can be a powerful

political tool. It educates people, creates awareness and presents information in a way that people can easily absorb. Artists think from their heart - revolutionary and visionary ideas. This is how artists create a significant cultural and political contribution.



People have always recognised how powerful art can be. In past history , many artists were being criticized , threatened and censored for their art work by belligerent governments or dissident groups because their work can affect the politics in a given area. However, in the hands of good people, art can give hope and courage to a society that is going

through difficulty and hardship.

The fact that art is connected to human experience makes it obvious that we have always made it part of our way of living. That is why ancient and present day indigenous groups of people from all over the world have been mixing art and their



traditional artefacts or rituals without them knowing. This is one of the fundamental reasons why art is important.

Art is also a powerful form of therapy. It helps us to evolve, grow and understand ourselves, each other and the world we live in.

Everyone can make art because each has a unique way of looking at the world. Art is a divine form that can be enjoyed no matter what skill level one has. It is a form of defining our emotions and feelings. Everyone is an artist in their own way. When we express ourselves in a focussed, meaningful way that becomes our art. To get started as an artist we will need to learn skills, get ourselves a dedicated workplace and practice lots to develop our art . We can either keep the art to ourselves or show it to others. Art needs to be paired with confidence to showcase it to the world. After all, art is meant to be seen, shared and experienced.

Art is more than just a practice- it is a way of life. Art is more than just a skill- it is a passion. Art is more than just an image- each one tells a story. If we really like being creative, we should make art a part of our lives and maybe we might totally devote ourselves to it.

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